



# Well London Healthy Spaces Project: Pocket Park (Brent)

## Mental Well-being Impact Assessment (MWIA)

Brent Mental Health User Group (BUG)  
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**Well London** South London and Maudsley



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## THE IMPACT OF POCKET PARK IN BRENT ON MENTAL WELL-BEING

### 1. INTRODUCTION

This project focuses on improving the space, essentially between two houses, known locally as 'Pocket Park' and broadening its use by local residents. The project aims to take into account how the park is currently used and consider ways of both enabling those using it at the moment to continue to do so while getting local residents actively involved in both improving and expanding use of Pocket Park.

### 2. AIMS OF THE MWIA ASSESSMENT

- To identify how Pocket Park potentially impacts on the mental health and well-being of local residents who are currently using the park as well as those who might like to use it in future
- To identify ways in which the project might maximise its positive impacts and minimise its negative impacts
- To develop indicators of mental well-being that can be used to measure, evaluate and improve the mental well being of local residents using the park

#### • WHAT DO WE MEAN BY MENTAL HEALTH AND WELL-BEING?

The Mental Well-being Impact Assessment was developed using the 1997 Health Education Authority definition of mental health and well-being:

*"...the emotional and spiritual resilience which enables us to survive pain, disappointment and sadness. It is a fundamental belief in one's own and others dignity and worth" (Health Education Authority, 1997)*

Put simply our mental well-being is about how we think and feel.

#### • METHODOLOGY

##### **The Mental Well-being Impact Assessment (MWIA)**

The Mental Well-being Impact Assessment is a two part screening toolkit that enables people to consider the potential impacts of a policy, service or programme on mental health and well-being and can lead to the development of stakeholder indicators. The toolkit brings together a tried and tested Health Impact Assessment methodology with the evidence around what promotes and protects mental well-being.

The Department of Health 'Making it Happen Guidance' for mental health promotion (2001) identifies four key areas that promote and protect mental well-being:

- Enhancing Control
- Increasing Resilience and Community Assets
- Facilitating Participation
- Promoting Inclusion



The MWIA is based on these four key areas and helps participants identify things about a policy, programme or service that impact on feelings of control, resilience, participation and inclusion and therefore their mental health and well-being. In this way the toolkit enables a link to be made between policies, programmes or service and mental well-being that can be measured.

*“How people feel is not an elusive or abstract concept, but a significant public health indicator; as significant as rates of smoking, obesity and physical activity” (Department of Health 2001).*

### **MWIA Workshop**

The purpose of the workshop is to work with stakeholders to identify from their perspective the key potential impacts that Pocket Park will have on the mental well-being of local residents. It will also identify actions to maximise positive impacts and minimise potential negative impacts on mental well-being

**Table 1: Workshop participants**

<b>Role</b>	<b>No.</b>	<b>%</b>
Mental Health Commissioning – Brent tPCT	1	5%
Health Promotion – Brent tPCT	2	10%
Brent Mental Health User Group	2	10%
Brent Mind	1	5%
Groundwork	1	5%
YMCA	1	5%
SLAM	2	10%
Local residents	7	35%
Brent tPCT – Community Participation leads (HP)	3	15%
<b>Total</b>	<b>20</b>	<b>100%</b>

### **What does mental well-being mean to the stakeholders in the project?**

The participants were asked to write down words they associate with mental well-being. They were then asked to group them and link the words to come up with a definition of mental well-being.

#### *stakeholder definition-*

Mental wellbeing is having a sense of happiness and wellbeing in our lives, having family and friends and interesting ways of spending our time, looking after all aspects of ourselves – and feeling able to cope with any problems in our lives. It is also about knowing when we and others around us need support and being able to ask for it.

- **POPULATIONS MOST LIKELY TO BE AFFECTED BY THE POCKET PARK IN BRENT**

Public mental health aims to promote and protect the mental health of the whole population, while recognising that (as is the case for physical health) levels of vulnerability to poor mental health will vary among different population groups. A discussion was facilitated for participants to identify groups they thought were particularly likely to be affected. The findings are presented in table 2.



**Table 2**

<b>Priority population group affected or targeted by your proposal</b>
Those currently using the park, for example, people with dogs, young people and possible drug users... could be adversely affected and feel excluded
Local residents who are not currently using the park, including older people who feel unsafe on the streets, people who for any reason/s do not want to be around dogs, anyone who does not feel that it is a pleasant and welcoming open space, people who cannot access the space as a result of access issues
The aim of the project is to involve local residents in making decisions about ways of improving this space to increase use of this local resource and to encourage local people to get actively involved in both using and maintaining the park

- **WHAT ARE THE KEY IMPACTS OF THE POCKET PARK ON MENTAL HEALTH AND WELL-BEING?**

The MWIA toolkit suggests a four-factor framework for identifying and assessing protective factors for mental well-being, adapted from Making it Happen (Department of Health 2001) and incorporates the social determinants that affect mental well-being into four factors that evidence suggests promote and protect mental well-being:

- *Enhancing control*
- *Increasing resilience and community assets*
- *Facilitating participation*
- *Promoting inclusion.*

Participants were introduced to the factors and asked to think about the Pocket Park and rate how important it was to local residents and the potential impact that the service could have on it.

### **The Potential Impact of the Pocket Park on Feelings of *Control***

#### **Enhancing control - the evidence**

A sense of agency (the setting and pursuit of goals), mastery (ability to shape circumstances/ the environment to meet personal needs), autonomy (self-determination/individuality) or self-efficacy (belief in one's own capabilities) are key elements of positive mental health that are related to a *sense of control* (Mauthner and Platt 1998; Stewart-Brown et al in press).

Enhancing control is fundamental to health promotion theory and practice, and is identified in the Ottawa Charter as a key correlate of health improvement:



“Health promotion is the process of enabling people to increase control over, and to improve their health”. (Ottawa Charter for Health Promotion. WHO, Geneva, 1986.)

Lack of control and lack of influence (believing you cannot influence the decisions that affect your life) are independent risk factors for stress (Rainsford et al 2000). People who feel in control of their everyday lives are more likely to take control of their health (McCulloch 2003). Job control is a significant protective factor in the workplace, and this is enhanced if combined with social support (Marmot et al 2006).

Employment protects mental health; both unemployment and job loss increase risk of poor mental health: financial strain, stress, health damaging behaviour and increased exposure to adverse life events are key factors associated with job loss that impact on mental health (Bartley et al 2006). Job insecurity, low pay and adverse workplace conditions may be more damaging than unemployment, notably in areas of high unemployment (Marmot and Wilkinson 2006)

Participants were then invited to work between themselves to identify which of the factors that contribute to a sense of control that they felt the Pocket Park had the potential to have either a positive or negative impact, and the degree of importance of that impact. The results are presented in figure 1.

### **Figure 1 Prioritisation Grid - *Enhancing control***

Picture of prioritisation grid on enhancing control – participants rate areas of importance.



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Having identified these participants were invited to work through their top three priorities to identify in more detail the potential impacts and any recommendations that emerged.

The results are presented in table 3.





**Table 3**

Top priorities	Impacts of the Pocket Park on <i>enhancing control</i>		Comments and Actions	Measure
	(+) Positive Impact	(-) Negative Impact		
<b>Opportunities to influence decisions and have your say</b>	People feel empowered Feel part of the local community Have ownership and investment in the space Inclusion Can get involved in local democracy	Anyone excluded feels they have no control and no say Those not included could feel they have a lack of choice Those not included could feel they have no influence on planning Conflict if there are no opportunities to participate, which may build resentment	Provide good information and promote awareness about opportunities to participate Promote equality of opportunity for all Include groups who are traditionally harder to reach Engage existing users of the park or space to get involved	
<b>Physical environment</b>				
<b>Building skills and attributes and belief in own capability</b>				



## **The Potential Impact of the Pocket Park on *Resilience***

### **Increasing resilience and community assets – the evidence**

Emotional resilience is widely considered to be a key element of positive mental health, and is usually defined as the extent to which a person can adapt to and/or recover in the face of adversity (Seligman; Stewart Brown etc). Resilience may be an individual attribute, strongly influenced by parenting (Siegel 1999), or a characteristic of communities (of place or identity) (Adger 2000). In either case, it is also influenced by social support, financial resources and educational opportunities. It has been argued that focusing on ‘emotional resilience’ (and ‘life skills’) may imply that people should learn to cope with deprivation and disadvantage (Secker 1998). WHO states that interventions to maximise and take advantage of health assets can counter negative social and economic determinants of health, especially among vulnerable groups. The result is improved health outcomes.

[www.euro.who.int/socialdeterminants/assets/20050628\\_1](http://www.euro.who.int/socialdeterminants/assets/20050628_1)

Good physical health protects and promotes mental health. Physical activity, diet, tobacco, alcohol consumption and the use of cannabis and other psychotropic substances all have an established influence on mental well-being. Capacity, capability and motivation to adopt healthy lifestyles are strongly influenced by mental health and vice versa. There is growing evidence of the link between good nutrition, the development of the brain, emotional health and cognitive function, notably in children, which in turn influences behaviour. (Mental Health Foundation 2006; Sustain 2006). Regular exercise can prevent some mental health problems (anxiety and depression), ameliorate symptoms (notably anxiety) improve quality of life for people with long term mental health problems and improve mood and levels of subjective well-being (Grant 2000; Mutrie 2000; Department of Health 2004). Both heavy drinking and alcohol dependence are strongly associated with mental health problems. Substance misuse may be a catalyst for mental disorder. (Alcohol Concern; Mental Health Foundation 2006; Royal College of Psychiatrists 2006)

Although the evidence is limited, spiritual engagement (often, but not necessarily expressed through participation in organised religion) is associated with positive mental health. Explanations for this include social inclusion and participation involving social support; promotion of a more positive lifestyle; sense of purpose and meaning; provision of a framework to cope with and reduce the stress of difficult life situations (Friedli, 2004; Aukst-Margetic & Margeti, 2005) (Idler *et al*, 2003); Mental Health Foundation 2006.

Low educational attainment is a risk factor for poor mental health; participation in adult education is associated with improved health choices, life satisfaction, confidence, self-efficacy and race tolerance. (Feinstein *et al* 2003; James 2001)

Communities with high levels of social capital, for example trust, reciprocity, participation and cohesion have important benefits for mental health (Campbell and McLean 2002; Morgan and Swann 2004). Social relationships and social engagement, in the broadest sense, are very significant factors in explaining differences in life satisfaction, both for individuals and communities.





Neighbourhood disorder and fragmentation are associated with higher rates of violence; cohesive social organisation protects against risk, stress and physical illness; (Fitzpatrick and LaGory 2000; McCulloch 2003;

Physical characteristics associated with mental health impact include building quality, access to green, open spaces, existence of valued escape facilities, noise, transport, pollutants and proximity of services (Chu et al 2004; Allardyce et al 2005; Jackson 2002). Housing is also associated with mental health - independent factors for increasing risk of poor mental health (low SF36 scores) are damp, feeling overcrowded and neighbourhood noise (Guite et al 2006;HF Guite, Clark C and Ackrill G (2006). Impact of the physical and urban environment on mental well-being Public Health supplement in press).

Participants were then invited to work between themselves to identify which of the factors that contribute to a sense of resilience that the Pocket Park had the potential to have either a positive or negative impact, and the degree of importance of that impact. The results are presented in figure 2.

### **Figure 2 Prioritisation Grid - *Increasing resilience and community assets***

Picture of prioritisation grid for resilience – participants rate areas of importance.



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Having identified these participants were invited to work through their top three priorities to identify in more detail the potential impacts and any recommendations that emerged.

The results are presented in table 4.



**Table 4**

Top priorities	Impacts of the Pocket Park on <i>resilience and community assets</i>		Comments and Actions	Measure
	(+) Positive Impact	(-) Negative Impact		
<b>Access to green space and shared public utilities</b>	Increased opportunities Having a relaxing space Having somewhere for all generations to go A play area for children and an area for older people	Decreased opportunities for dog walkers and dogs Possible conflict of space Those next to the park might object to its increased use – and potential noise Potential impact of redirection of existing park users... where will they go? Community conflict		
<b>Social support and social networks</b>	Reduce isolation Meeting place for people Location for other community activities			
<b>Trust and safety</b>	People feel safe in the local environment	Potential impact of redirection of existing park users (eg dogs, dog walkers and drug users)		



## **The Potential Impact of the Pocket Park on *participation and Inclusion***

### **Facilitating participation and promoting social inclusion – the evidence**

Feeling useful, feeling close to other people and feeling interested in other people are key attributes that contribute to positive mental wellbeing (Stewart Brown et al, Warwick Edinburgh, Measuring Mental Wellbeing Scale forthcoming).

Participation is the extent to which people are involved and engaged in activities outside their immediate household, and includes cultural and leisure activities, as well as volunteering, membership of clubs, groups etc., participation in local decision-making, consultation, voting etc.

Social inclusion is the extent to which people are able to access opportunities, and is often measured in terms of factors that exclude certain groups, e.g. poverty, disability, physical ill-health, unemployment, old age, poor mental health.

Although participation and social inclusion are different constructs, there is some overlap in the literature, and they are therefore considered together here.

Strong social networks, social support and social inclusion play a significant role both in preventing mental health problems and improving outcomes (SEU 2004). Social participation and social support in particular, are associated with reduced risk of common mental health problems and poor self reported health and social isolation is an important risk factor for both deteriorating mental health and suicide (Pevalin and Rose 2003). Similarly for recovery, social participation increases the likelihood, while low contact with friends and low social support decreases the likelihood of a recovery by up to 25% (Pevalin and Rose).

However, social support and social participation do not mediate the effects of material deprivation, which in itself is a significant cause of social exclusion (Mohan et al 2004; Morgan and Swann 2004; Gordon et al 2000).

Anti discrimination legislation and policies designed to reduce inequalities also strengthen social inclusion (Wilkinson 2006; Rogers and Pilgrim 2003).

There is some evidence that informal social control (willingness to intervene in neighbourhood threatening situations, e.g. children misbehaving, cars speeding, vandalism) and strong social cohesion and trust in neighbourhoods, mitigates the effects of socio-economic deprivation on mental health for children (Drukker et al 2006).

Higher national levels of income inequality are linked to higher prevalence of mental illness (Pickett et al 2006). Mental health problems are more common in areas of deprivation and poor mental health is consistently associated with low income, low standard of living, financial problems, less education, poor housing and/or homelessness. Inequalities are both a cause and consequence of mental health problems (Rogers and Pilgrim 2003; SEU 2004; Melzer et al 2004).

Participants were then invited to work between themselves to identify which of the factors that contribute to facilitating participation and reducing social isolation they felt the Pocket



Park had the potential to have either a positive or negative impact, and the degree of importance of that impact. The results are presented in figure 3.



### Figure 3 Prioritisation Grid – *Participation*

Picture of prioritisation grid for participation – participants rate areas of importance.



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Having identified these participants were invited to work through their top three priorities to identify in more detail the potential impacts and any recommendations that emerged.

The results are presented in table 5.



Top priorities	Impacts of the Pocket Park on <i>Participation</i>		Comments and Actions	Measure
	(+) Positive Impact	(-) Negative Impact		
<b>Having a valued role</b>	People can get involved as volunteers A local resident could get involved as a member representative on committee making decisions People could have a role in teaching or supporting others Job opportunities Access to training	Difficult if one person dominates Difficulties if the representative misuses their position or role	Advertise opportunities for involvement Have a policy of employing and using local people in the project Develop a role description to clarify a representative's role and authority and responsibilities for consulting with other local residents in order to represent their views	Ask people how they feel about their involvement People feeling valued in their role People wanting to continue their involvement
<b>Opportunities to get involved</b>				
<b>Opportunities for socialising Activities that bring people together</b>				

Table 5



#### Figure 4 Prioritisation Grid – *Inclusion*

Picture of prioritisation grid for inclusion – participants rate areas of importance.



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Having identified these participants were invited to work through their top three priorities to identify in more detail the potential impacts and any recommendations that emerged.

The results are presented in table 6.



**Table 6**

Top priorities	Impacts of the Pocket Park on <i>Inclusion</i>		Comments and Actions	Measure
	(+) Positive Impact	(-) Negative Impact		
<b>Trust</b>	<p>Enabling neighbours to improve their relationships                      People working together                      Getting to know others                      Bringing different communities together                      Create identity, unity and a sense of belonging                      Create ownership and respect of space</p>	<p>Encourages use which might cause difficulties with particularly those living either side of the park                      People could create a sense of fear and mistrust                      People could feel excluded eg current users of the park if their needs are not considered                      What happens when people do not get on?                      Come, do and go!</p>	<p>More engagement with community on an ongoing basis                      Encourage change                      People need to avoid abusing trust                      Avoid discriminating against any communities but particularly seek to engage local dog walkers and drug users currently using the park                      Involve volunteers, community champions, youth and older people                      Encourage people learning from each other                      Encourage people passing on knowledge to each other                      Recognise individuals who are involved</p>	<p>That different communities are using the park                      There is interaction between young and older people                      People feel safer                      People support each other                      Young people help older people – and vice versa                      PRIDE!</p>





## Summary

The stakeholders identified 14 key determinants of mental well-being that were both of high importance and had a high impact.

MWIA Area	Increasing Control	Resilience	Participation	Inclusion
Key Determinants	Opportunities to influence decisions	Access to green spaces and shared public facilities	Having a valued role	Accepting and being accepted
	Physical environment	Social support and social networks	Opportunities to get involved	Trust others
	Skills and attributes and opportunities for self-help	Trust and safety	Opportunities for socialising and activities that bring people together	Practical support to enable inclusion

A focus on these for the Pocket Park will help promote the mental well-being of local residents in Brent.

## 7. DEVELOPING INDICATORS OF WELL-BEING

“What gets counted, counts.” Therefore being able to measure progress and impact of the Pocket Park proposal on the determinants of mental well-being identified by the stakeholders through the MWIA is an important step. Building on the initial ideas from stakeholders about “how you know” that certain impacts have happened 9 indicators have been developed.

Factor	Determinant	How do you know?	Data collection	Frequency
Increasing Control	Influencing decisions	People have been involved in making decisions	Carry out brief survey	Annually
Resilience	Access to green space	More people are using the space	Count the number of people using the space – via the brief survey	Annually
Participation	Having a role	Ask people about how involved they feel and about any barriers to participation	Carry out brief survey	Annually



<b>Inclusion</b>	Trust	Different communities are using the park There is interaction between young and older people People feel safer People support each other Young people help older people and vice versa People have pride in the Pocket Park	Via the brief survey mentioned earlier - to include both quantitative and qualitative information	Annually
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See appendix 2 for further information.

## 8. RECOMMENDATIONS

These recommendations will need to be taken forward by Groundworks and the YMCA who are leading on this project locally, working with local residents.

In order to involve local residents from all communities in this project – and in future use of the park – it is likely that conflict resolution will need to be incorporated. Currently, the park is largely used by people with dogs and there is a suggestion that drug users may also be using it. The environment is not seen as particularly welcoming or open to all local residents.

### Promoting inclusion

The focus of this discussion was on ‘trust’ and there were a number of practical suggestions made to address issues raised.

- The first was to put bins and bags in the park to enable people to clear up after their dogs and make clear that this is an expectation when using the space. This would improve the space, making it more attractive to local residents generally while avoiding excluding the people who are currently using it.
- Involving the local drugs project, the Junction Project, could have a similar impact
- Produce and circulate publicity to publicise the project and ways of getting involved
- Friends of Pocket Park – similar to the Friends of Gibbons Park scheme – could be adopted since this is potentially empowering, involve people of different age groups and create local cohesion
- Local people could get actively involved as volunteers, perhaps linking up with existing organisations that work in relation to volunteering



- Consider whether the existing gate at the entrance is accessible, for example, to disabled people with physical impairments and particularly to wheelchair users. If not, replacement with a more accessible design needs to be considered
- Attracting and involving potential new users of the Pocket Park needs to address the needs of, for example, older people who are currently staying indoors, scared to go out and feeling isolated and possibly losing independence

### **Facilitating participation**

This discussion focused on 'having a role'. Residents' participation will give the project a sense of ownership. In order to achieve this participation:

- Opportunities to volunteer and get actively involved need to be appropriately advertised to local residents – including those currently using the park
- The model of volunteering used needs to incorporate flexibility in relation to the length of time any of those involved might want to continue their commitment

### **Enhancing control**

This discussion focused on 'influencing decisions'. In order to ensure that people can have their say:

- There needs to be ongoing consultation and involvement with local residents, particularly ensuring that people from all communities have the opportunity to have their say, in order to avoid feelings of resentment or exclusion of those whose views might traditionally be overlooked such as teenagers

### **Resilience**

This discussion focused on 'access to green space'. A big issue which needs to be addressed in relation to this project was possible displacement of those currently using the space, for example, people with dogs and drug users.

- It needs to be borne in mind that access to green space is important to everyone and no-one should be excluded. It is preferable that provision is made to enable use of the space, including by a broader range of local residents, to change in future, while still enabling current users of the park to use it

### **Incorporating the well-being measures identified in this report**

Consideration needs to be given to collecting the well-being measures identified in this report.



## APPENDIX ONE

### Evaluation of the Stakeholder MWIA workshop

Participants were invited to complete an evaluation form. The results suggest the workshop was successful in:

- Involving a good number of local residents and stakeholders
- Working flexibly
- Facilitation was considered to be good and it was seen as positive that the MWIA trainers were also involved
- Good to develop understanding of what mental well-being means

Additional comments included:

- Need good preparation, for example, to be confident with the process
- In order to involve local residents it is necessary to consider the programme and timing, for example, whether lunchtimes or evenings are preferable
- Venue needs to be one that people like
- Avoiding jargon and using accessible language is preferable
- Use of briefing sheets might be useful
- Making decisions about content of the grids can be challenging

Suggestions for improvements were:

- Ensuring that a final decision has been made about the focus of the project prior to going through this process (there had been some discussion about the suggestion from one resident that focusing on a larger park nearby might be preferable)
- Having an overview of all the grids to be completed would be useful, particularly to avoid duplication and enable people to focus on one at a time
- Information highlighted from the grids need to be linked into what those involved in the workshop identified as mental wellbeing
- Need to 'sell' the reasons for the process eg to funders
- Need to think through and be clear about incentives for local residents



## APPENDIX TWO

### Measurements

A survey needs to be created in future to measure local residents' views and opinions, experiences of involvement, barriers to participation and gather ideas for improvement to involvement.

