



**The Abundance Project:**  
Enhancing Cultural & Green Inclusion in Social Prescribing in Southwest London to Address Ethnic Inequalities in Mental Health

**What is the problem and what change is needed?**

**What steps are needed to bring about change?**

**What outcomes should we work towards?**

**What are our entry points for engaging CGCAs and target groups?**

- Black, minority ethnic, and refugee communities have far poorer mental health (MH) and more difficulties getting appropriate help.
- Over 95% of Black, minority and refugee communities reside in unhealthy urban environments, where there is more air pollution, overcrowding, and limited access to green spaces. This can contribute to MH problems.
- When people actively engage with cultural and green community assets (CGCA), such as art galleries, museums, natural spaces, and community groups, this can benefit their MH and wellbeing.
- Social prescribing (SP) could help to connect people to CGCAs, which could reduce MH inequalities.

**TARGET GROUPS**  
Ethnically diverse minority communities with MH inequalities

**THEORY OF CHANGE**

**RESOURCES**  
Project funding  
Partnerships  
Training  
Expertise

**FACILITATORS**  
Community Hubs,  
Community members  
Researchers,  
Practitioners,  
Policymakers, Artists  
and Designers

**ENABLERS**  
Communities,  
CGCAs, SPs, LAs,  
VCSOs, Research  
team

WP1. Researchers work with community representatives using **Expressive Life Writing** to establish relationships

- **Lived Experience Stories** from 5 ethnically diverse minority communities
- **End of WP1 Review** report

WP2. Community members undertake **Participative Asset Mapping** of Cultural and Green Community Assets (CGCAs)

- Five **Participative Asset Maps** of local assets
- **End of WP2 Review** report

WP3. A **Tiger Team** is set up to support multi-stakeholder dialogue and understanding of community needs

- **Community needs analysis** using Joint Analysis Workshops (JAWs)
- **End of WP3 Review** report

WP4. Stakeholders participate in **Hackathons** to co-design solutions and generate 'products'

- Six **Co-designed 'products'** to address community needs
- **End of WP4 Review** report

WP5. Communities are supported to participate in **implementing** the co-designed products

- Six **Implementation Reports**
- **End of WP5 Review** report

WP6. Outcomes and processes are **evaluated** with all stakeholders and the learning is captured

- **Evaluation report** of process and outcomes feeding into the overall **Project report**

Improved MH & wellbeing of minority ethnic groups

Increased awareness and engagement of CGCAs amongst minority ethnic groups

Increased accessibility of CGCAs

Understanding of community language used for MH & wellbeing

Understanding of communal values relevant to MH & wellbeing

Understanding of how to implement interventions into CGCAs, SP, councils or VCSOs

Stronger community relations

Improved collaborative community research

Unexpected or unintentional outcomes, assumptions & risks

**Sources of Evidence**

- **Community knowledge (e.g., lived experience, asset mapping)**
- **Team/Advisory Group meetings**
- **Research literature**
- **Project questionnaires**
- **Interviews**

Community Survey (via community hubs)

Research Team Questionnaire (end WPKs)

Stakeholder Participant Questionnaire (end WPKs)

CGCA Questionnaire (users of CGCAs WP5)

**INPUTS**

**ACTIVITIES**

**OUTPUTS**

**GOALS/OUTCOMES**

**EVIDENCE OF IMPACT**

Barriers and blockers

Moderators

Enablers