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Health Inequality Insights in Medway

An exploration of Medway data relating to the Marmot Principles

January 2026

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Contents

Executive summary

Accumulation of experiences throughout life – from environmental, social, physical and economic perspectives – shape our health and wellbeing outcomes. Inequalities in any or all of these factors can result in inequalities in health and wellbeing outcomes.

This report draws on a body of existing research and public engagement, using insights from Medway citizens and evidence from Medway-based research to start building a framework to illustrate how people are experiencing living in Medway and the resultant inequality of impact on their health and wellbeing outcomes.

The report is designed to create a baseline understanding, and further work with residents of Medway will 'fill in the gaps' about who, what, why and how life experiences are affecting residents' health and wellbeing. It will therefore direct future engagement and research planning to build a richer picture of how health inequalities are being experienced across Medway. Ongoing collation of insight and evidence will inform actions that target identified inequalities and work towards Medway being a Marmot Place.

The report is structured in chapters that are aligned to a Marmot principle. Each chapter has drawn out common 'issues' from across the papers that were submitted. An issues map within each section aims to illustrate the complexities of the issues identified within the Marmot principle and explore how these issues are currently impacting people. Where possible, each chapter also tries to identify who is talking about these experiences.

A total of 90 submissions, submitted from a range of organisations, were analysed:
- 73 submissions had data that related specifically to Medway
- 17 were Medway and Swale specific.

The level of supporting demographic data varied greatly across all submissions. A lack of demographic data was identified as an original exclusion criterion, but this would have resulted in a significant number of submissions not being included in the review. A decision was, therefore, made to include submissions without a profile of participants and to highlight the lack of demographic data as a limitation to the analysis.

This report has only been able to lift insights and evidence relating to health inequality from the range of submissions made. As a result, there are gaps in the identified issues, for example, there were no submissions around maternity care and, thus, create a key gap under Marmot principle 1.

In summary the following themes were identified:

<u>Marmot principle 1. Give every child the best start in life</u>
Insights highlighted poor availability and accessibility of early family support as a significant issue. This was higher among parents facing additional pressures including a lack of peer support for single parents, and unmet needs for parents with neurodiverse children.

<u>Marmot principle 2. Enable all children, young people and adults to maximise their capabilities and have control over their lives</u>
Young people in Medway felt that they lacked agency in decision-making. Several responses voiced feeling excluded from decisions about their own lives and not being taken seriously in discussions about issues like their mental health. Limited access to services such as mental

health support and community and leisure activities were highlighted as undermining young people's sense of agency and control over their lives.

'Young people felt they knew themselves best with regards to what worked for them (and) the timing of interventions, but their influence over their care was limited'

Marmot principle 3. Create fair employment and good work for all

Themes identified around working hours and workplace stress that are restricting opportunity for healthy behaviours such as time for physical activity and with families. For those not in work, there were more significant barriers such as limited access to work due to disabilities, and a perceived lack of good employment opportunities in Medway.

Marmot principle 4. Ensure a healthy standard of living for all

A strain on finances was the most significant factor limiting access to the essentials needed for healthy living. This encompassed issues like the rising costs of living, food, housing, and ability to participate in community and social activities. There were particular challenges associated with accessing welfare benefits and being able to afford to pay for dental appointments.

'The rising cost of living including fuel, food, mortgage/rent, energy and clothes is making life hard'

Marmot principle 5. Create and develop healthy and sustainable places and communities

There were a wide range of issues raised which were identified as contributing to residents feeling unsafe, including crime, antisocial behaviour, littering, and drug and alcohol use. Green spaces were considered to be protective of health, but factors like transport, time, and safety were seen as restricting access to these.

'*Rural communities are losing transport links. Transport links may not be able to break even in these areas. Someone who was once independent and self-sufficient may then be a victim of isolation'*

Marmot principle 6. Strengthen the role and impact of ill-health prevention

This principle had the highest response rate. It was felt that one's ability to engage in prevention of ill health was unequal, and dependent on a range of factors including life experience, language, confidence, level of knowledge, and existing health conditions. Residents also referred to healthcare and constraining factors in accessing referral and assessment routes for this.

Marmot Principle 7. Tackle racism, discrimination and their outcomes

Residents in Medway highlighted that discrimination is prevalent at both an individual level, illustrated in interpersonal racism, but also embedded in society and systems, including the health service. Discrimination was seen as based on many characteristics, including language, gender and sexual identity, race, personal history including drug addiction, and disability.

'My parents' face racism, and what they say to my parents really hurts me. They had it growing up, but it still happens'

Marmot principle 8. Pursue environmental sustainability and health equity together
The dominant theme was that poor quality environments which damaged health were more prevalent in the more deprived areas in Medway. This included air pollution and lower access to green space.

Suggested next steps

1. Building a view of how wider factors (social, environmental, economic, behavioural) are impacting the health and wellbeing of people within Medway, particularly gaining insights into how some of these are disproportionately impacting different groups of people, will be important in informing the actions required to reduce health inequalities.

   It is suggested that future engagement is planned to enrich the insight mapping process and complete gaps around who – and what – is being heard.

2. To date, the majority of public and patient engagement has been focused on hearing about either an aspect of health or wellbeing, often being service specific, designed to gather insight or research to inform service improvement. Insights and evidence to date are heavily weighted to health and wellbeing outcomes, with little mention of wider determinants such as education, personal economics or the environment. Very little insight gathering or research has focused on looking at the interactions across the social determinants over a longer time period.

   It is suggested that as a Marmot Place, there needs to be a shift in how engagement is framed, with a view of generating insights that can have a wider application, exploring cumulative effects rather than just service improvement.

3. Reviewing the insight and research submissions used within this report has highlighted challenges in utilising some of the data as unless a personal characteristic is given as a group identity, for example, engaging with young people, there is often no mention of someone's gender, age, sexuality or ethnicity to allow a deeper exploration of who is being most impacted by the issues. To enable future insights and research to contribute to a growing understanding of the complex interactions of all areas of a person's life, this will also need to include factors such as levels of education, personal economics, housing and where someone lives etc.

   It is suggested that the Marmot programme works in a phased way, with system partners, to raise awareness of the emerging insight and evidence framework and, therefore, how future engagement, insight and research reports can be structured to enable sharing of findings to build insight maps and, in time, monitor how people experience changes over the duration of the 10-year programme.

Background

Medway is looking to become a Marmot Place, which is all about creating a fairer, healthier Medway for all its residents. Good health is about much more than health care services. There's another key factor – the everyday conditions that affect our health. These are called the building blocks of health, like where we're born, live, work and grow older, but these are not always experienced equitably.

Professor Sir Michael Marmot said: "Marmot Places have the mission to improve health and change lives for the better. Health inequalities are not inevitable, and it is possible to close the gap, but it takes a collective effort for this to happen."

One of the first activities within this programme was a scoping exercise to gather information that will generate a baseline understanding of how people are experiencing health inequalities across Medway.

All community groups, organisations, large and small, and key system partners were asked to submit any engagement insights or projects from over the previous five years that highlighted people's views on health inequalities – be it through surveys, community conversations or reports.

Submissions were made to a generic email address **marmot@medway.gov.uk**

Over a four-week period, organisations were asked to submit documents for consideration.

The insight gathering had three exclusion criteria for submissions:

1. The submission contained no insights related to the eight Marmot principles
2. The submissions insights were not attributable to Medway
3. The submission insights did not have supporting demographic data to enable a robust level of analysis

This report explores the collective insights and research undertaken by organisations across Medway to be pooled and reviewed to build an understanding of how Medway residents are currently experiencing health inequality. It explores inequality against each of the eight Marmot principles, seeking to build a picture of the issues people are experiencing, who is experiencing them and in what circumstances.

This report uses 'issues' that people have raised across the submissions. The issues are brought together in a 'mapping' for each Marmot principle, which aims to illustrate some of the interactions of factors behind the insights and research relevant to the Marmot principle in question.

The maps have sought to identify different factors behind the issues:

- Psychological: perception, feelings, knowledge and attitudes
- Health and wellbeing: physical and mental health
- Environmental: immediate locality and wider environment
- Financial / economic: personal finance, housing, physical assets
- Social: social support, education, community relationships
- Behavioural: choices and actions taken

A lack of comparable demographic data across the submissions has limited the levels of exploration around who is experiencing the issues identified, so the report focuses on identify

patterns in what Medway residents have been saying over the last five years to guide future engagement, discussions and considerations for action.

This report is, therefore, presented as a benchmark of the collective intelligence from across Medway organisations, as intended for use as a 'benchmark tool' to inform further work.

The insights contained within these submissions were collated using a consistency tool (see Appendix 1) and grouped around the 8 Marmot principles, with each principle forming a chapter of this report.

The insights extracted were both quantitative and qualitative. Insights were grouped per Marmot principle and analysed using a form of thematic analysis, with no pre-determined framework.

Limitations

This report has only been able to lift insights and evidence relating to health inequality from the range of submissions made. As a result, there are gaps in the identified issues under each Marmot principle.

The range of submissions received generated a significant number of insights, but also highlighted the diversity in engagement and insight gathering mechanisms utilised across the community groups and system partners. There are areas of inconsistency that have created limitations that the reader should bear in mind when considering the issues and insights presented within this report, to ensure that readers do not overemphasise or minimise the findings.

Issue	Limitation	Mitigation
Weighting: How many people have contributed to the data behind 'issues' identified within the report?	Issues identified under each Marmot principle have no sense of weighting in terms of how many people have raised the issue, as this information was not routinely given across all submissions. As a result, there is some bias in the issues that have been identified.	This has been mitigated, where possible, by ensuring that themes are referenced from different perspectives across submissions. This has been easier to achieve in well documented areas such as mental health.
Methodologies: A diverse range of engagement and data gathering methodologies has been used by partners who have submitted insights for consideration.	Different methodologies have been utilised to target engagement with different audiences. It is, therefore, important to consider how this might have generated bias within the insights gathered.	Each chapter highlights the range and volume of engagement methodologies identified by source submissions, so that the reader can be aware of how the insights that have been extracted were originally gathered. This can enable the reader to consider possible bias within the wider sample
Location: Understanding where people sharing the insights live within Medway.	Many submissions did not routinely include information about where those engaged live. This means that insights raised have been experienced by people within Medway, but it is difficult to identify if these are universal experiences or only experienced within localities such as Chatham.	The reader to take account of the source of the shared insight and the engagement method to consider if they believe this to be universal or hyper local experiences.
Demographic profiles: Understanding who is sharing their insights.	Many submissions did not routinely include information about the demographic profile of people engaged. Where submissions did state target engagement cohorts, it has not been able to attribute individual insights to individual demographics	Each chapter highlights the known and unknown demographic groups engaged with behind the insights extracted from source submissions. This can enable the reader to consider insights drawn within the wider context of demographic population factors.

Understanding the data set

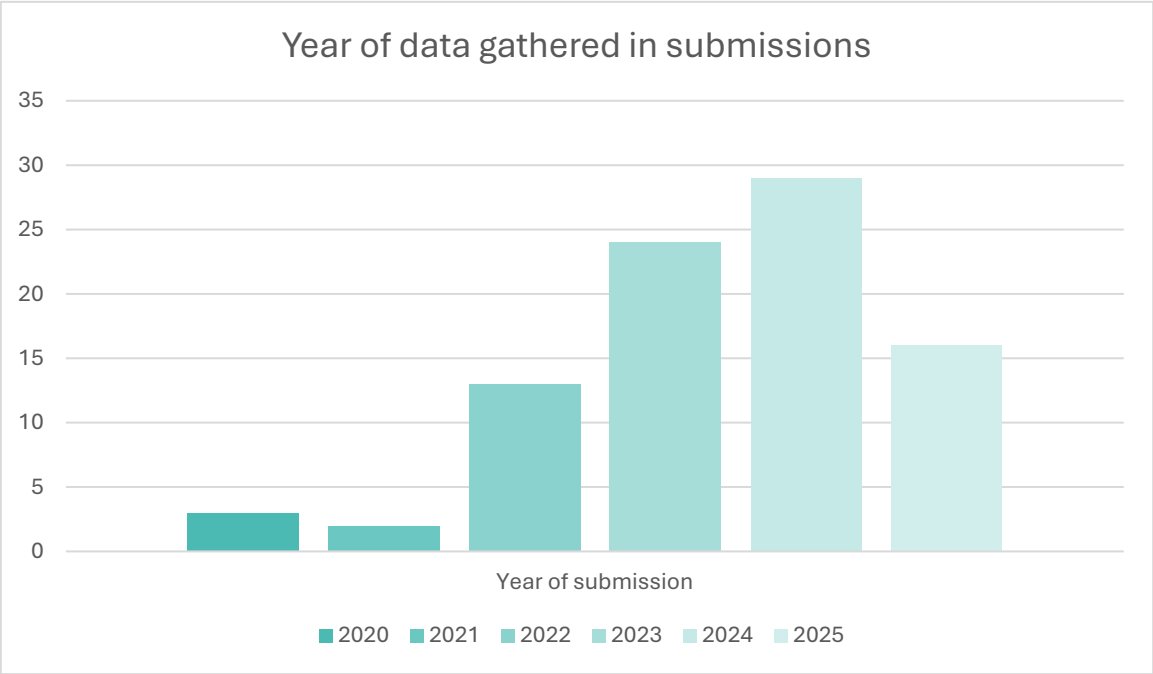
A total of 102 submissions were received: (full list of submissions in Appendix 2)
- 3 submissions were excluded as they did not relate to Marmot principles
- 9 were excluded as it was not possible to determine if insights were directly related to the experience of Medway residents when included in a Kent and Medway submission.

A total of 90 submissions were analysed:
- 73 submissions had data that related specifically to Medway
- 17 were Medway and Swale specific.

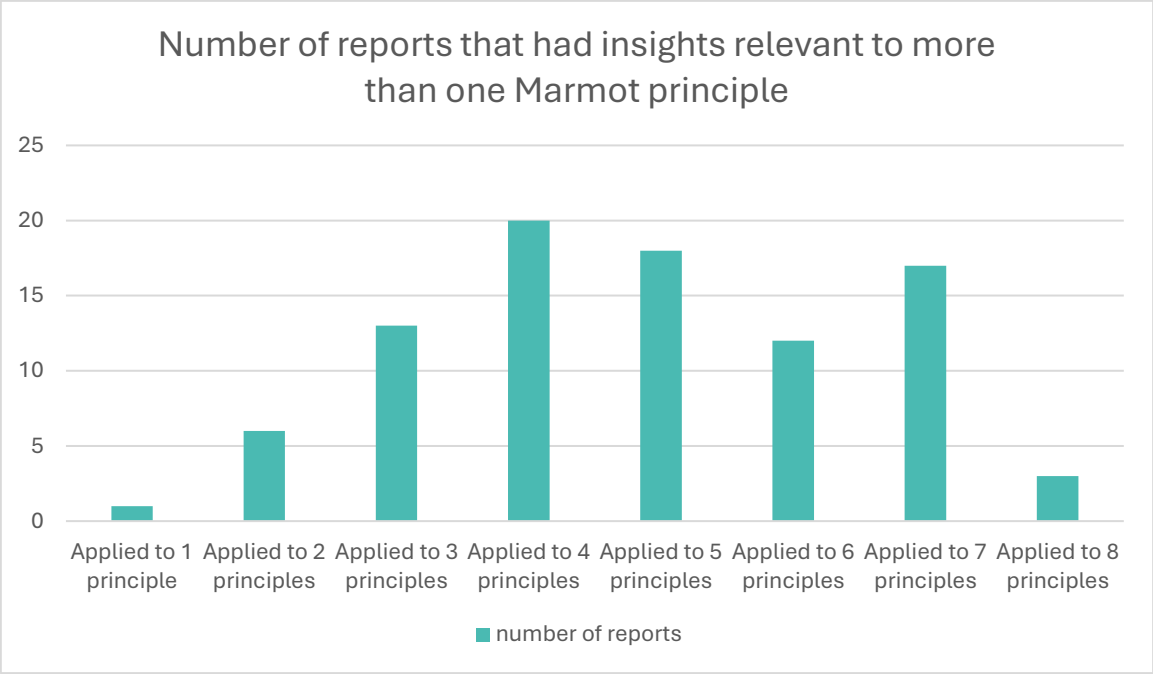
The level of supporting demographic data varied greatly across all submissions. A lack of demographic data was identified as an original exclusion criterion, but this would have resulted in a significant number of submissions not being included in the review. A decision was, therefore, made to include submissions without a profile of participants and to highlight the lack of demographic data as a limitation to the analysis.

Age of the data within submissions

Submissions covered data gathered over the last five years, with 77% (69) of submissions drawing on data gathered in the last three years.



Allocating insights across the 8 Marmot principles



A total of 450 insights were extracted from the 90 submissions. These were distributed across the 8 Marmot principles.

Marmot principle	No. of insights analysed
Principle 1: Give every child the best start in life	36
Principle 2: Enable all children, young people and adults to maximise their capabilities and control over their life	69
Principle 3: Create fair employment and good work for all	42
Principle 4: Ensure a healthy standard of living for all	68
Principle 5: Create healthy and sustainable places	81
Principle 6: Strengthen the role and impact if ill-health prevention	87
Principle 7: Tackle racism, discrimination and their outcomes	50
Principle 8: Environmental sustainability	17

Range of organisations that made submissions

A range of organisations submitted evidence, including voluntary sector organisations, independent research organisations, commissioned engagement organisations, Universities, NHS and local authority partners. (A full list of the reports from each organisation can be found in Appendix 2).

- Active Kent and Medway
- Diabetes UK
- Dr Amanda Carr
- Health and Wellbeing Board
- Dr Amanda Carr, Matthew Scott and Daisy Elvin
- Dr Warren Hickson
- EK360
- Healthwatch Kent

- Healthwatch Medway
- Healthwatch Medway in partnership with Carers First, Better Together
- Hood and Woolf
- Kent and Medway Integrated Care Board
- Medway and Swale Health and Care Partnership
- Medway Council
- Medway Public Health
- Medway Parents & Carers Forum
- Medway Voluntary Action: Involving Medway & Swale
- Healthwatch Medway and Healthwatch Kent
- Medway Voluntary Action: Community Health Catalyst Programme
- Medway Voluntary Action and Medway and Swale Health and Care Partnership
- Medway Youth Council
- Mental Health Voice
- Tempo
- Tonic
- University of Greenwich
- Author Not Specified

Engagement and insight gathering methodologies

A range of engagement and insight gathering methodologies were referred to within the 90 submissions analysed. Many submissions had used more than one engagement methodology in gathering people's experiences and feedback.

Types of activities that generated the insights:

Insights gathering methodology	Number of times cited
Digital, online survey	33
Semi-structured face-to-face or over the phone interviews	31
Public engagement feedback	26
Community visit	24
Focus group feedback	24
High street engagement	14
Workshop	6
Consultation	3
Case studies	4
Conference	1
Participatory photography	2
National data sets, with potential for some randomised controlled trials or non-randomised studies	2

Of the 90 submissions, 66% (59) used more than one type of engagement methodology. Of those that used a single methodology (31 submissions), the most common (55%) was reported use of digital or online survey (17 of the 31).

Demographic profile of Medway residents represented

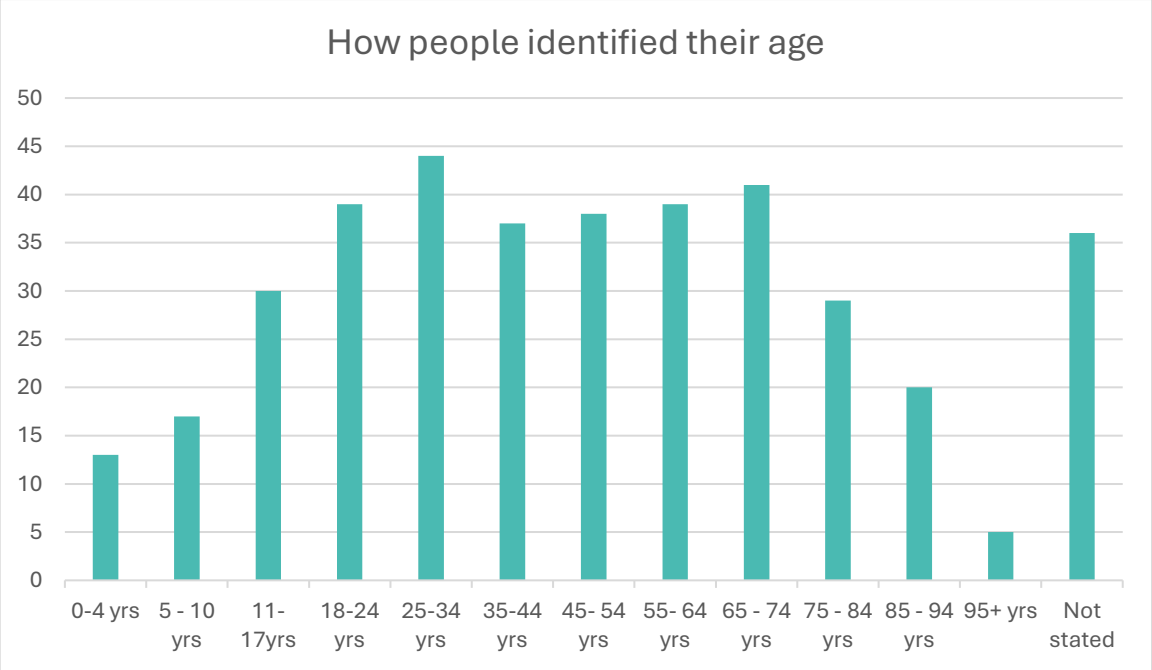
Not all submissions included demographic data about participants and those that did have used different ways to capture this information. It is, therefore, not possible to generate an overview of the demographic profile of the total number of residents that have contributed to the collective insights gathered from across the 90 submissions, but it is possible to generate a summary of the groups of people engaged.

Gender

37% (33) of submissions did not state gender of participants. Those that did identified that male and female participants had been engaged.

Age

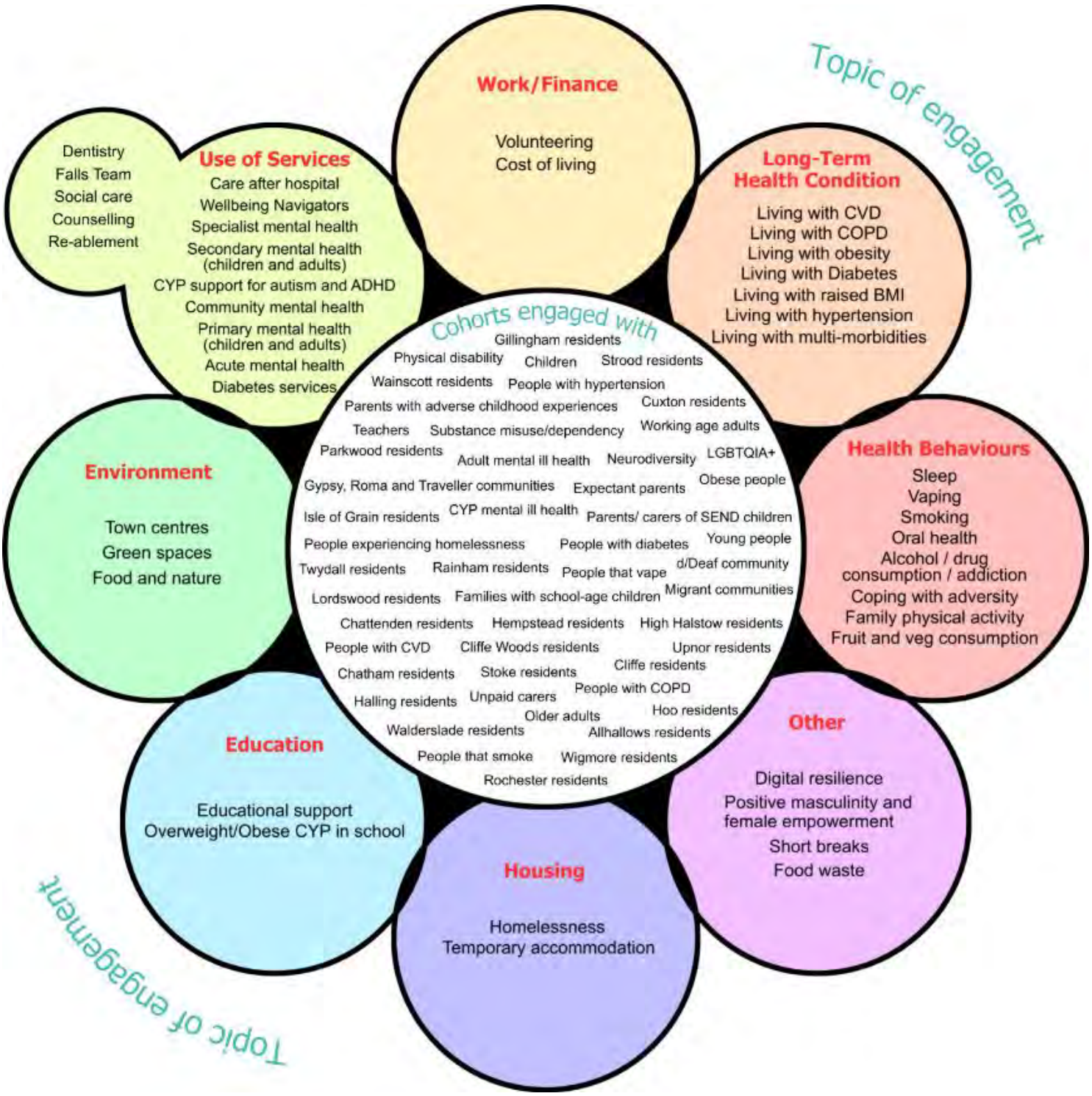
40% (36) of submissions did not state age groups, but of those that did, a range of age groups have been engaged. This graph is an indication of the number of times that submissions said they had engaged people from within these age groups, not a count of the individuals engaged.



Target cohorts

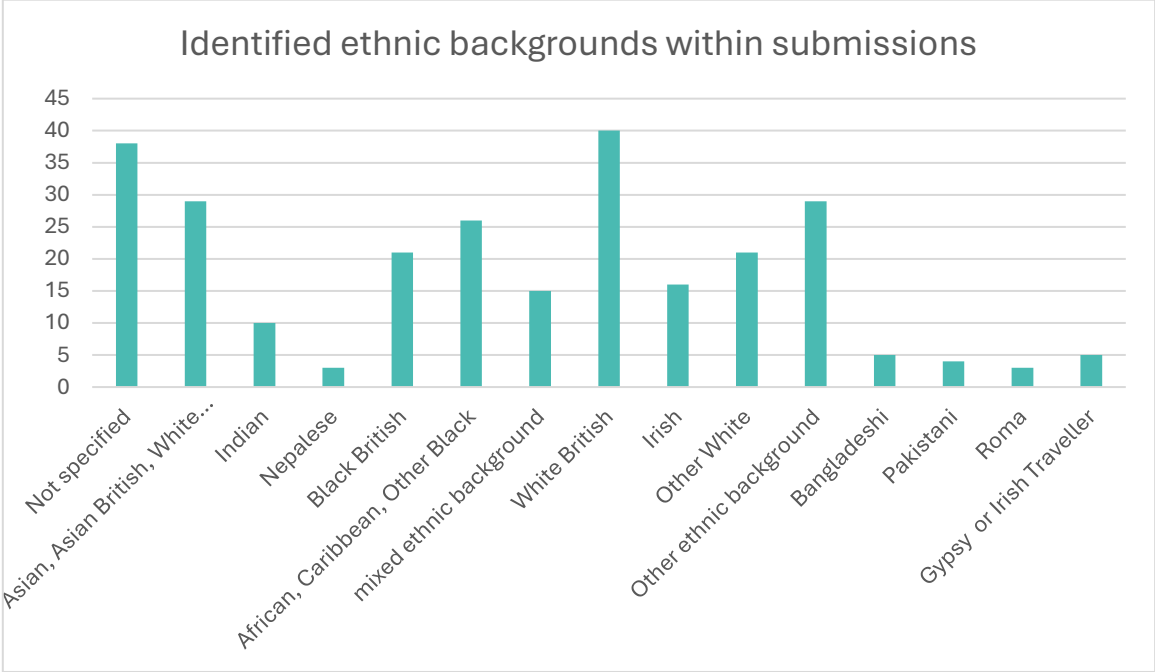
Each submission stated the target cohort they were engaging. The image below maps the different character groups that were targeted cumulatively across the submissions. The image also identifies the topics and subject areas that people were engaged on.

Although the volume of people engaged was not routinely recorded by all submissions, a mapping of the target cohorts gives an indication of the breadth of people that have been engaged across the total of submissions.


Topic of engagement
Work/Finance
Volunteering
Cost of living
Use of Services
Care after hospital
Wellbeing Navigators
Specialist mental health
Secondary mental health (children and adults)
CYP support for autism and ADHD
Community mental health
Primary mental health (children and adults)
Acute mental health
Diabetes services
Dentistry
Falls Team
Social care
Counselling
Re-ablement
Long-Term Health Condition
Living with CVD
Living with COPD
Living with obesity
Living with Diabetes
Living with raised BMI
Living with hypertension
Living with multi-morbidities
Cohorts engaged with
Gillingham residents
Physical disability
Children
Strood residents
Wainscott residents
People with hypertension
Parents with adverse childhood experiences
Cuxton residents
Teachers
Substance misuse/dependency
Working age adults
Parkwood residents
Adult mental ill health
Neurodiversity
LGBTQIA+
Gypsy, Roma and Traveller communities
Expectant parents
Obese people
Isle of Grain residents
CYP mental ill health
Parents/ carers of SEND children
People experiencing homelessness
People with diabetes
Young people
Twydall residents
Rainham residents
People that vape
d/Deaf community
Lordswood residents
Families with school-age children
Migrant communities
Chattenden residents
Hempstead residents
High Halstow residents
People with CVD
Cliffe Woods residents
Upnor residents
Chatham residents
Stoke residents
Cliffe residents
Halling residents
Unpaid carers
People with COPD
Older adults
Hoo residents
Walderslade residents
Allhallows residents
People that smoke
Wigmore residents
Rochester residents
Environment
Town centres
Green spaces
Food and nature
Health Behaviours
Sleep
Vaping
Smoking
Oral health
Alcohol / drug consumption / addiction
Coping with adversity
Family physical activity
Fruit and veg consumption
Education
Educational support
Overweight/Obese CYP in school
Other
Digital resilience
Positive masculinity and female empowerment
Short breaks
Food waste
Housing
Homelessness
Temporary accommodation
Topic of engagement

Ethnicity

42% (38) of submissions did not state ethnic groups of those they engaged, but of those that did, we can see that a range of ethnic groups have been engaged. This graph is an indication of the number of times that submissions said that they had engaged people from within these ethnic groups, not a count of the individuals engaged.

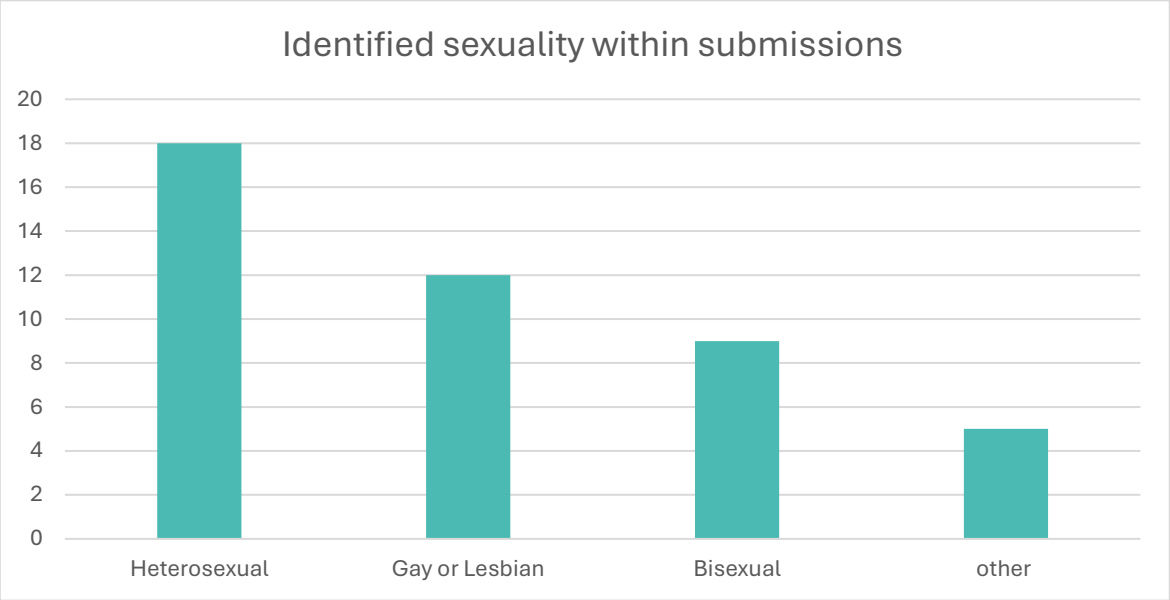


19 submissions reported that participants' first language was not English. Native languages mentioned included:

- Armenian
- British Sign Language
- Bengali
- Bulgarian
- Chaldean
- Czech
- Dari
- French
- Gujarati
- Kurdish
- Latvian
- Lithuanian
- Mandarin
- Nepali
- Polish
- Punjabi
- Roma
- Romanian
- Russian
- Shona Singala
- Slovakian
- Tagalong
- Tamil
- Ukrainian
- Urdu
- Yoruba

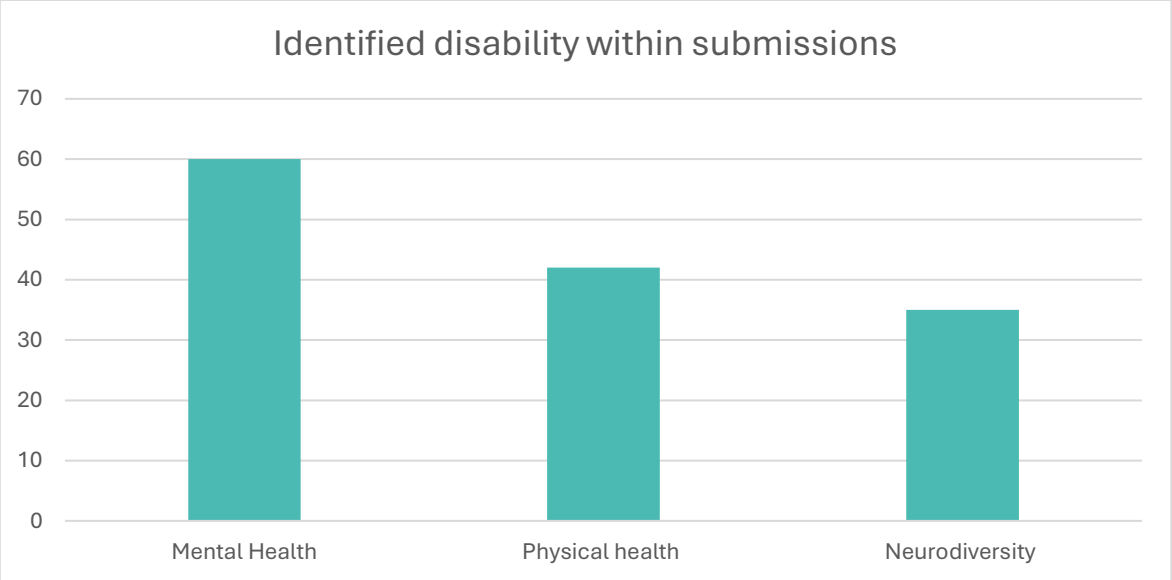
Sexuality

86% (77) of submissions did not state the sexuality of participants, but of those that did, we can see that people identified their sexuality in a range of ways. This graph is an indication of the number of times that submissions said that they had engaged people who identified with these sexualities, not a count of the individuals engaged.



Disability

51% (46) of submissions did not state if participants had identified as having a disability. Of those that did, we can see that people identified mental health, physical disability and neurodiversity. This graph is an indication of the number of times that submissions said that they had engaged people from within these groups, not a count of the individuals engaged.



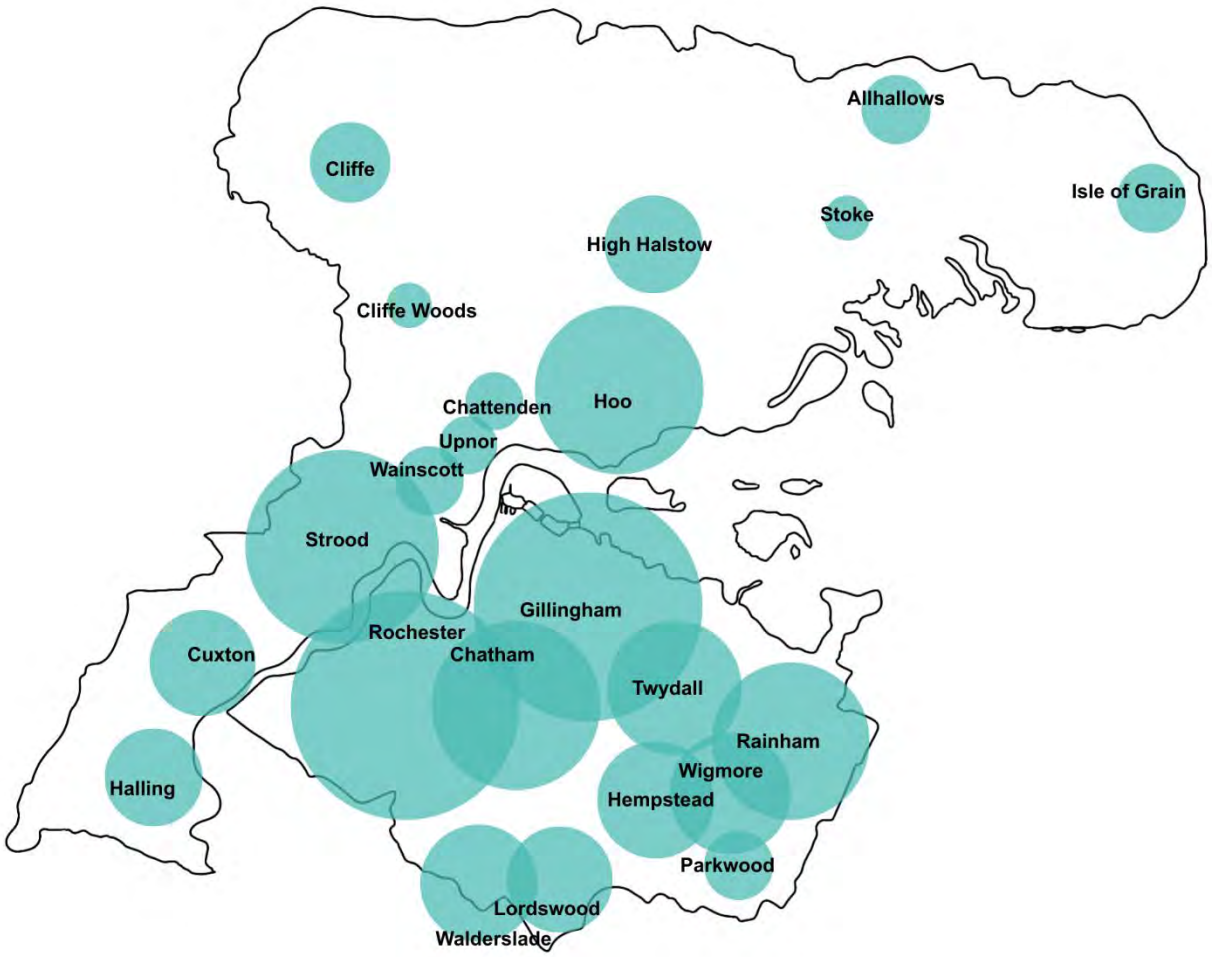
Carers

36% (32) of submissions identified that they had engaged with carers within their participants.

Localities across Medway that are represented

50% (45 out of 90) of submissions stated that participants had come from Medway.

Other submissions gave reference to localities within Medway, where participants had been engaged with. The map below shows how many times an area was mentioned as a location from which participants had been engaged. It is not a count of the number of individual participants.



PRINCIPLE 1

Give every child the best start in life: Focus on reducing inequalities in early development and ensuring that all children have access to quality education and support.

The data in this section has focused, where possible, on parents and children under five years of age.

To enable the reader to build context to the insights explored within this chapter, the reader is advised to consider the following:

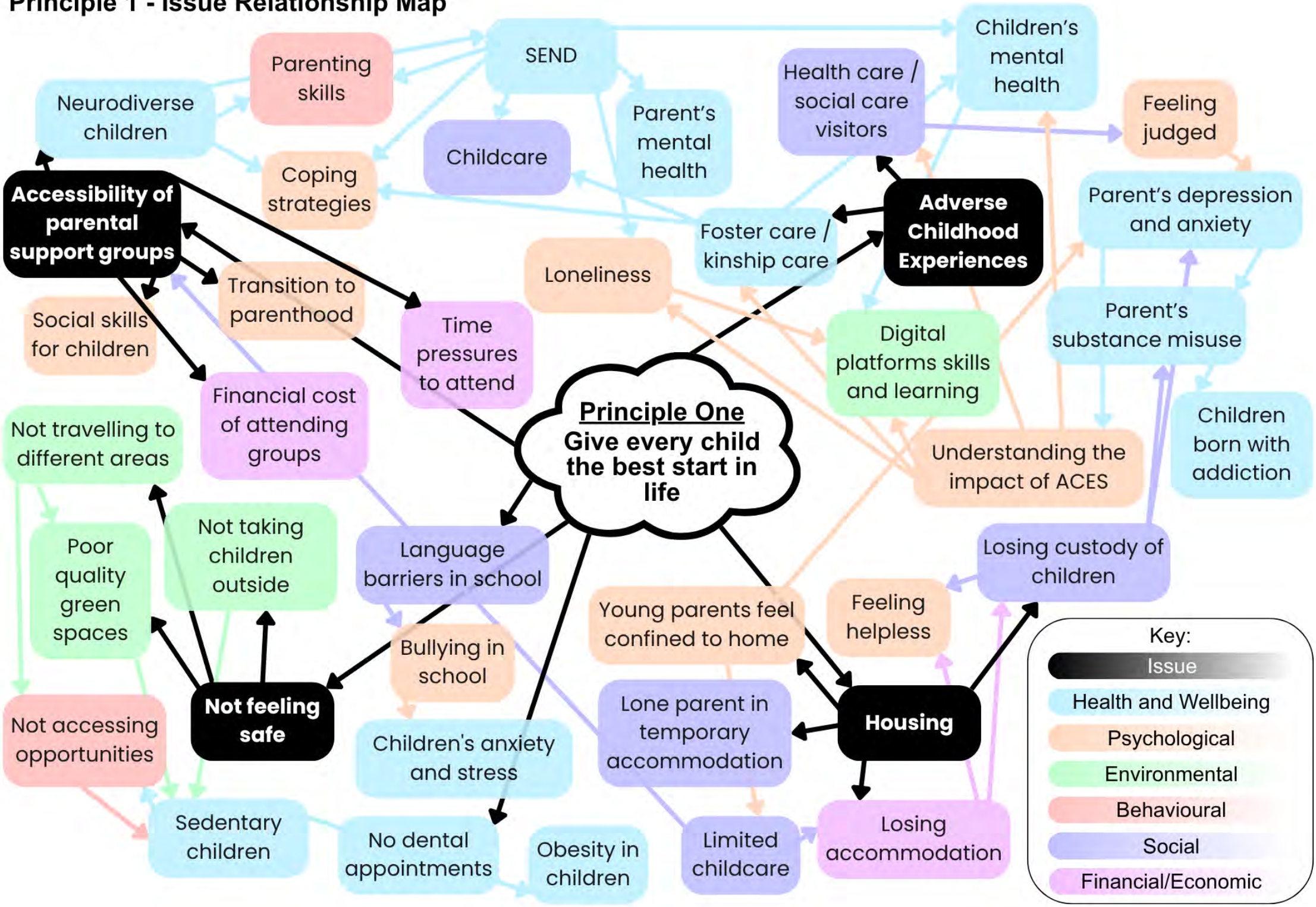
- Source of submissions that have provided insights under this Marmot principle
- Engagement methodologies used to generate insights
- That issues raised are not quantified in terms of how many people are affected.

Engagement and insight gathering methodologies

Insights that related to this principle were drawn from submissions that used the following methodologies:

Insights gathering methodology	Number of times cited
Digital, online survey	11
Public engagement feedback	10
Community visit	8
Focus group feedback	7
High street engagement	3
Workshop	3
Consultation	2
National data sets, with potential for some randomised controlled trials or non-randomised studies	2
Case studies	1

Principle 1 - Issue Relationship Map



Issues raised within the Insights

Parental support groups

- The specific support needs of single mothers and the challenges of having time for accessing peer support. 'Not having free time to get involved in community groups and activities, with 13% specifying using their free time for their family. "Childcare limits me, it makes it difficult."' (Page 9) How people feel about living in Medway – a spotlight report focusing on the peninsula villages of Chattenden, Hoo, Wainscott and Upnor. Healthwatch Medway
- The support that fathers may require in 'the emotional and psychological transition into fatherhood'. Parenting Services and Workshops - Collated V4
- 'Parents of neurodiverse children, improving the general support offered, educating parents about ADHD and autism, for example, "Parenting classes on how to manage my child".' (Page 44) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity
- "Attending groups was considered a way for parents to socialise their young children, facilitated through playing together and group activities, especially crucial for first-time mothers. So, it gets her to socialise with other kids, to learn, like, sharing and to learn to be nice and stuff with other kids." (Page 6) Supporting young parents and their children to overcome adversity. M&S HaCP
- Accessible peer support and facilitated groups can help people develop 'coping strategies for stress and anxiety related to fatherhood.' (Page 18) Parenting Services and Workshops - Collated V4
- 'Encouraged the attendees to develop a support network, combating loneliness and providing social interaction through shared experiences.' (Page 26) Child-Friendly Medway Annual Report, Medway Council
- 'Parents expressed that they felt unprepared for parenting and had to learn as they went along. During our discussions, we talked about how receiving focused education about parenting during their teenage years, specifically between the ages of 14 and 16, would have been beneficial for them.' (Page 7) Supporting young parents and their children to overcome adversity. M&S HaCP
- 'New mums seemed particularly enthusiastic, as they often described how they were learning along the way, seeking advice from their family, or as in one case, a mum used Google to access best practices and advice that left her always feeling that she was second-guessing about adversity in parenting. "So I've kind of gone with advice from like family and friends and been Googling stuff and just finding out what's best really. But I feel if I had that support, maybe I wouldn't be second-guessing everything I'm giving her."' (Page 4) Supporting young parents and their children to overcome adversity. M&S HaCP
- 'Although mothers who regularly attended groups felt at ease with their peers and friends, they discussed the challenges they had faced and were still facing when trying to join other groups. They were particularly concerned about how other mothers might judge them regarding their parenting style, or how they would feel if they weren't accepted into an existing group.' (Page 6) Supporting young parents and their children to overcome adversity. M&S HaCP
- Other barriers to gaining access to groups involved having time, distance and associated transport issues, including affordability, knowing how to get to groups, and parking. "Yeah, all them little things that you don't know. Especially like, I think you're the same as me, we've never lived in this area in our whole lives and have no clue. I don't even know how to walk here yet, so I've got to try and walk back." (Pages 6/7) Supporting young parents and their children to overcome adversity. M&S HaCP

Parental Adverse Childhood Experiences

- Several mothers shared their painful experiences of childhood adversity and how it has affected their present lives. They often discussed their current struggles with depression and anxiety, expressing concerns about how these issues might affect their own children. (Page 3) Supporting young parents and their children to overcome adversity. M&S HaCP
- However, although mums wanted to gain more information and understanding about ACEs, they shared concerns about how accessing information and learning opportunities were generally unavailable to them. “Well, personally, I haven't heard anything about it.” Supporting young parents and their children to overcome adversity. M&S HaCP
- As we explored how mothers could learn more about ACEs, they emphasised healthcare visitors as the most logical source of support. However, in all cases, there was a palpable sense of disappointment and frustration about their experience of their healthcare visits. Mums felt that, although initial contact was empathetic and encouraging, things quickly shifted to a ‘process only approach’, concentrating on measurement and going through questionnaires, resulting in them feeling slightly judged and generally unsupported. “But they start off being all nicey, nicey, happy, oh, congratulations, but then the second time they come, you're almost like you’re in a boardroom, and if they miss anything, they look at you and like, oh, that's not helpful, you’re gonna do this, you’re gonna do that - I think as a young mum, you kind of have a fear of doing anything wrong in front of these people.” These experiences were echoed by another mother, who described how the visits started well but quickly led to cancelled appointments or simply not turning up, causing anxiety and stress. Supporting young parents and their children to overcome adversity. M&S HaCP
- In contrast, parents spoke about how digital platforms could be particularly useful, especially in providing learning materials and opportunities about ACEs and signposting to support groups, including for fathers, with one father saying: “Yeah, it would be nice, yeah. It's like, there might be some dads doing things differently. And we can, like, swap ideas on how to look after the child.” (Page 7) Medway Local Joint Health and Wellbeing Strategy (JLHWS) - Qualitative Findings and Recommendations from Survey and Focus Group Engagement. Health and Wellbeing Board
- Parents expressed a keen interest in learning more about ACEs as it would help them identify adversity and its potential impact on their family. “If you don't know, then something could happen – but if you do know and see something, you can always contact someone.” Supporting young parents and their children to overcome adversity. M&S HaCP
- “I think it’s good to have that understanding because I think it’s everything that you do at this point with your child when they’re in their early years, is so fundamental to everything.” (Page 4) Supporting young parents and their children to overcome adversity. M&S HaCP

Access to dentistry

- ‘18% (5) people told us that they were struggling to get NHS appointments for their children.’ (Page 7) Focus on Dentists. Healthwatch Medway
- “My daughter has just turned one, and we’ve been trying to get her registered with a dentist, and they either don’t answer the phone or won’t accept NHS. Our health visitor told us to go on a certain site to check who has availability, but no one updates it.” (Page 7) Focus on Dentists. Healthwatch Medway

Feeling 'safe' within your community and 'child friendly' spaces (For more insights about this topic see Marmot principle 5)

- "There is a lot of crime and its dirty. It affects how safe I feel, especially being somewhere with my children. Even at the park and in the playground." (Page 10) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway
- Feedback provided on what would encourage you to use green spaces more – Raise the quality of play areas (the majority are so desolate and depressing in terms of design, equipment and with no shade for the summer). Access to Green Spaces in Medway Survey (Excel spreadsheet)

Obesity

- There has been a large rise in excess weight in children in Year R and Year 6 (and presumably other years) both locally and nationally. (Page 4) Obesity pre and post pandemic. Kent and Medway Integrated Care System

Housing (For more insights about this topic see Marmot principle 5)

- "I have been told I can no longer stay at my accommodation because I allowed a partner I separated from to look after their children, through a family arrangement, as I have no other form of childcare support. I have been told I have to leave where I am staying." (Page 10) A spotlight report – What did people tell us about housing and homelessness? Mental Health Voice
- A charity received a phone call from a pregnant woman who was homeless: "She has been evicted from her current hotel and has nowhere to go. She does not have any food and does not know where she is going to stay tonight. She said she does not want to be here anymore. The staff member who is supporting this lady said she feels the system is not fit for purpose. How can a pregnant lady be left with nowhere to go?"' (Page 10) A spotlight report – What did people tell us about housing and homelessness? Mental Health Voice
- All the mothers (and one father) discussed the challenges of isolation and loneliness as young parent. Many mothers shared how they often felt confined to their homes, leading to a sense of social disconnection. "I lean heavily on baby groups because it's just getting out of the house." Going to groups gave mums a sense of connection with other mums where they could find friendship and support which was cited as being helpful to their mental health. "Well, I've got two children, and I find it quite stressful because one's three and one's one. So, I find getting out of the house actually helps my mental health a lot better. That's why I come to these sorts of groups." (Page 6) Supporting young parents and their children to overcome adversity. M&S HaCP

Foster care and cared for children

- 'Children in foster care have high rates of adverse childhood experiences and are at risk for mental health problems. Accessing appropriate support can also be more challenging for children who are looked after.' (Page 58) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott
- 'In Medway in 2018, 55.5% of looked after children had a special educational need, compared to 45.7% of children in need and 14.6% of all children. For those on SEN support or with an EHC plan, social, emotional and mental health is the most common primary type of special educational need for looked after children, covering 38.5% of those with a statement or EHC plan and 46.3% of those with SEN support.' (Page 19) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott

- ‘Two participants from the group have had their children taken away from them by social services and that has impacted their health, and they are left helpless and do not know where to go to find help. Although one participant understands there are solicitors and social workers they can go to, they feel their situation is unique and more challenging to resolve. One of the participants who eventually broke down crying mentioned: “Like every day I’m breaking down and emotional and crying…I just want to shout at everyone. I hate the world, like I’m angry constantly. I have actually lashed out at people that I love (tearful).”’ (Page 23) Medway Local Joint Health and Wellbeing Strategy (JLHWS) - Qualitative Findings and Recommendations from Survey and Focus Group Engagement. Health and Wellbeing Board

Childhood mental health

- ‘Children looked after face additional barriers to receiving appropriate mental health support. This review sought to address an existing gap in the research on mental health care and young people in child welfare settings.’ (Page 59) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott
- ‘Website states service available to CYP 0-19 years old, however, upon trying to access the service, parents were told it was not offered to those under 6 years.’ (paraphrased by Medway council staff member) (Page 66) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity
- ‘Children and young people with a learning disability, autism or both are not always identified early and children and young people with autism have to wait unacceptable periods of time for assessment.’ (Page 11) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott

English not a first language

- ‘The language barrier makes it difficult for their children to make friends and they worry about them being bullied at school because of their nationality.’ (Page 1) Vulnerable Migrants - Listening Event Report, Community Health Catalyst Programme; also mentioned in Medway Help the Ukrainians Listening Event, Community Health Catalyst Programme; and Child-Friendly Medway, Annual Report, Medway Council

Custody of children

- ‘Most participants said they had experienced significant emotional distress and feelings of helplessness as they discussed the Justice System/Child Custody in relation to their children.’ (Page 23) Medway Local Joint Health and Wellbeing Strategy (JLHWS) - Qualitative Findings and Recommendations from Survey and Focus Group Engagement. Health and Wellbeing Board

Addiction and substance misuse

- ‘The impact of substance abuse also led to several parents losing their children, who were removed by social services due to the chaos of addiction: “I lost mine to social services years ago for quite a long time.” One person described how her children were born with addiction, resulting in them being taken away from her at birth. “Yeah, they were all born addicted – dependent on drugs as well.”’ (Page 5) Listening to the voices of people who live with the challenges of addiction and who are, or have, experienced being homeless. M&S HaCP

Gap analysis for Principle 1

From the engagement detailed within the submissions received, the following elements of giving every child the best start have not been covered within submissions received:

- Pre-natal care and maternity services
- Experience of breastfeeding
- Development of child's physical and emotional health
- Development of child's cognitive and linguistic and social skills
- Child health checks

From the engagement detailed within the submissions received, the following cohorts are represented within this issue mapping under Principle 1. However, it is not possible to state how representative this is of the wider population:

- Single parents
- Fathers
- Parents of neurodiverse children
- Parents who have had adverse childhood experiences
- Parents / families in temporary accommodation
- Cared for children
- Parents with addiction

From the engagement detailed within the submissions received, the following cohorts don't appear to be represented within this issue mapping under Principle 1:

- Children for whom English is a second language
- Children who are disabled
- Child carers
- Prenatal parents

PRINCIPLE 2

Enable all children, young people and adults to maximise their capabilities and have control over their lives: Reducing inequalities in the early development of physical and emotional health, cognitive, linguistic, and social skills.

To enable the reader to build context to the insights explored within this chapter, the reader is advised to consider the following:

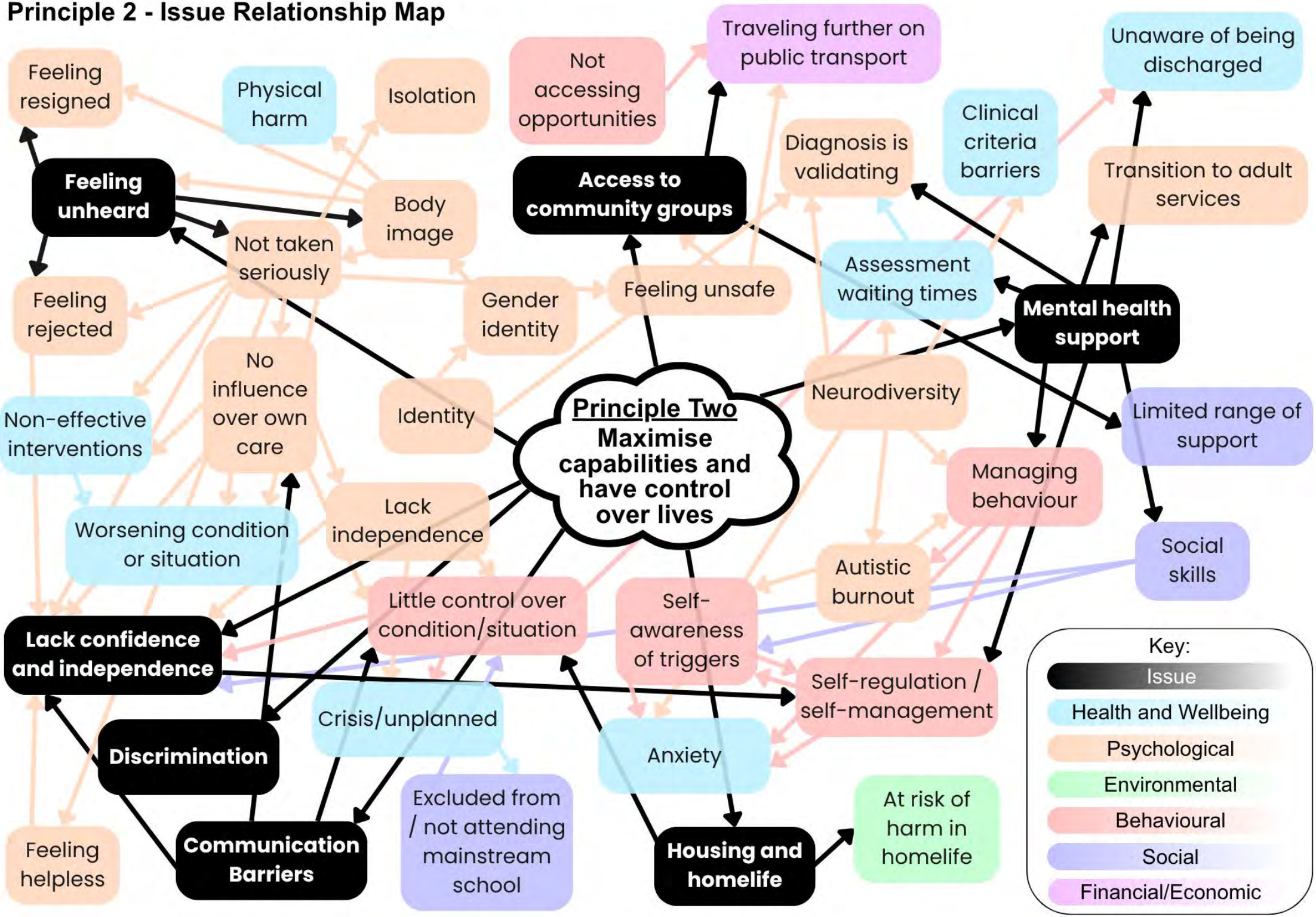
- Source of submissions that have provided insights under this Marmot principle
- Engagement methodologies used to generate insights
- That issues raised are not quantified in terms of how many people are affected.

Engagement and insight gathering methodologies

Insights that related to this principle were drawn from submissions that used the following methodologies:

Insights gathering methodology	Number of times cited
Public engagement feedback	22
Community visit	18
Digital, online survey	15
Focus group feedback	15
High street engagement	10
Workshop	6
Consultation	4
Semi-structured face-to-face or over the phone interviews	2
Conference	1
National data sets, with potential for some randomised controlled trials or non-randomised studies	1

Principle 2 - Issue Relationship Map



Issues raised within the Insights

Young people feeling unheard

- ‘Young people discussed the fact that it felt like things were happening to them rather than with them – that their voice was not heard and often their concerns were not taken seriously.’ (Page 8) Local Systems for Supporting Young People Who Need Both Social Care and Mental Health Services - Medway Review. Tonic
- ‘Students found they were having to travel further for leisure because there was a belief that young people were overlooked when it came to opportunities with a heavy focus on certain age groups. Participants also spoke about how they struggled to access some of the activities as they described a growing attention to some regional areas more than others.’ Medway Youth Council Annual Report 2025
- ‘Young people told us they wanted to be involved and consulted in decisions about their care, and it was important for them to have their voice heard.’ (Page 16) Comprehensive Mental Health Support for 18-25s - Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin
- ‘Care and support is too often provided in reaction to a crisis and is fragmented, with the young person and their family having little choice or control. The child or young person is often excluded from mainstream school, services or activities.’ (Page 11) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott
- ‘This was particularly important where young people felt they knew themselves best with regards to what worked for them, the timing of interventions but their influence over their care was limited.’ (Page 8) Local Systems for Supporting Young People Who Need Both Social Care and Mental Health Services - Medway Review. Tonic
- ‘Young people reported that during their initial experiences, they felt that several professionals did not take their concerns seriously. This included being offered a ‘cup of tea’ when describing they felt suicidal and/or concerns being minimised or ‘laughed off’ as ‘teenage issues’ by doctors and/or CAMHS teams.’ (Page 20) Local Systems for Supporting Young People Who Need Both Social Care and Mental Health Services - Medway Review. Tonic
- ‘There was a sense of resignation ‘what’s the point if they aren’t going to do anything’…Another asked their GP about getting top surgery, the GP said he didn’t feel comfortable referring them because of their mental health history, so the GP made the decision for them.’ Be You Project (Chatham Group) Listening Event Report. Community Health Catalyst Programme
- ‘Young people value being listened to, being consulted with and getting treated as credible sources of information in their own care.’ (Page 7) Local Systems for Supporting Young People Who Need Both Social Care and Mental Health Services - Medway Review. Tonic
- ‘Young people were candid in how some of the systems in place to keep them safe often made them feel unsafe, more frightened or punished rather than safeguarded.’ (Page 7) Local Systems for Supporting Young People Who Need Both Social Care and Mental Health Services - Medway Review. Tonic
- “If someone had just listened to me from the start, this could have been resolved, someone to sit down and hear what I had to say, that’s all it would have taken. I feel like my social worker should have been that person, they have a lot of power.” (Page 8) Local Systems for Supporting Young People Who Need Both Social Care and Mental Health Services - Medway Review. Tonic
- “Even small choices went a long way to making young people feel more involved and able to use the system more flexibly. “My counsellor asks for my opinion on how often I wish to be seen. I don’t have a choice about face-to-face or online, but I can say if I prefer video or telephone. I don’t have choices in other areas, so it’s good to be asked what works best for me.”’ (Young adult service-user) (Page 16) Comprehensive Mental Health Support for 18-25s - Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin

- ‘Being consulted and involved made young people feel valued and that their experiences were recognised and respected. This stands in contrast to the feelings of helplessness and rejection experienced by many young people when they felt they were not listened to or felt that their concerns were not being taken seriously.’ (Page 16) Comprehensive Mental Health Support for 18-25s - Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin

Mental health support for children, young people and adults

- ‘58% of young people said they felt supported at school, with 46% saying they did not believe there was sufficient mental health support in their school.’ (8.4) MYC Conference Report 2025. Medway Youth Council
- ‘Reported need was highest for emotional distress, transitions and future planning, mental health and emotional wellbeing and support at school. There were, however, also considerable levels of need across all areas surveyed including managing behaviour, communication, self-understanding and identity, relationships and social skills.’ (Page 2) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity
- ‘Emotional distress was reported as a need by 94% of Parents and Carers in the survey, and strongly across focus groups. Specific needs identified included understanding triggers for meltdowns, how to self-regulate and autistic burnout.’ (Page 3) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity. Doesn’t specify
- ‘Anxiety is a common problem in school-aged children with ASD. CBT and other psychosocial interventions have been developed as alternatives to pharmacological intervention to treat anxiety symptoms in students with ASD without co-occurring intellectual disability.’ (Page 42) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott
- Young people with autism reported barriers to accessing services for their mental health needs. (Page 3) Comprehensive Mental Health Support for 18-25s- Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin
- ‘Almost all of the young people we spoke to told us they had experienced difficulties with their emotional wellbeing or their mental health in the past, and 80% had sought help or tried to access support at least once.’ (Page 15) Comprehensive Mental Health Support for 18-25s- Kent and Medway Review 2021.Dr Amanda Carr, Matthew Scott and Daisy Elvin
- “Differences in clinical criteria between children’s and adult services were reported as a significant barrier by young people and families. Young people with moderate-level needs felt that there were few services available to them.’ (Page 3) Comprehensive Mental Health Support for 18-25s- Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin
- ‘Young people and families on the whole believed that transition to adult services would take place almost automatically if their level of need remained the same even though the young person had turned 18. There was a general lack of understanding about the differences between children’s (NELFT) and adult (KMPT) services.’ (Page 21) Comprehensive Mental Health Support for 18-25s- Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin
- ‘When you’re 16, 17, 18 years-old you’re on a waiting list [neurodevelopment] for three years. Now you’ve got to adult, and you’re put on the bottom of the list and you’ve got to wait all over again.’ (Care leaver) (Page 24) Comprehensive Mental Health Support for 18-25s- Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin
- ‘Young people between 12-25 years old have the highest incidence and prevalence of mental illness compared to any other age group across the life course.’ (Page 7) Comprehensive Mental Health Support for 18-25s- Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin
- ‘Too often children and young people fall between mental health and learning disability services and receive little or no support with their mental health; mental health problems

may not be picked up or appropriately treated at an early stage.' (Page 10) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott

- 'Most negative feedback was about waiting times and lists for treatment, coordination and continuity of care, care given by staff, communication between staff and patients, health inequalities and access to services.' (Page 6) Mental Health Voice insights - Local Mental Health Network Meetings
- 'It was common for young people to be notified they were being discharged back to their GPs via a letter. For some, this was the first communication they had received about transition. There was a very strong sense that this decision had been done 'to' them and there was little evidence of involving young people or families in how that decision was reached.' (Page 31) Comprehensive Mental Health Support for 18-25s- Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin
- 'Motivations for seeking diagnosis were explored. Findings across surveys and focus groups suggested the perceived need for a diagnosis to access support, CYP self-understanding and identity, and knowledge around how best to support CYP were driving factors in seeking an assessment for both CYP and Parents and Carers. "Validation that I have a mental illness/reasoning for the way I feel or act."' (13+ CYP survey.) (Page 3) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity. Doesn't specify
- 'The odds of children placed in foster care experiencing a psychiatric disorder were two times that of those in kinship care. Children in foster care had 2.4 times the odds of receiving mental health services. The odds of those in kinship care reporting positive emotional health were also twice as great as those in foster care. (Page 56) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott
- 'Overall, there was a lack of understanding of the differences between children's and adult services and few people reported being given opportunities to discuss and ask questions from healthcare professionals before turning 18. Parents reported great frustration at not having had the opportunity to discuss or talk to anyone in children's services about the decision, and there was little evidence that young people had been prepared for the change.' (Page 29) Comprehensive Mental Health Support for 18-25s - Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott, and Daisy Elvin
- There is a mental health risk for trans people based around their own body image, how they feel about themselves and anxiety about how others perceive them, this brings an associated risk of physical harm by using binders that are too small for too long. Poor quality binders can also be dangerous, these are bought online. Removing binders can cause serious harm to skin if instructions are not followed. (Page 3) Be You Project (Chatham Group) Listening Event Report. Community Health Catalyst Programme
- '75% of mental health problems in adult life (excluding dementia) start by the age of 18. Failure to support children and young people with mental health needs costs lives and money. Early intervention avoids young people falling into crisis and avoids expensive and longer-term interventions in adulthood.' (Page 16) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott
- 'Our most vulnerable young people's emotional wellbeing needs including children in care, care leavers, children and young people in transition, young offenders, children with disabilities, children and victims of sexual abuse and those at risk of developing harmful behaviours.' (Page 17) Local Systems for Supporting Young People Who Need Both Social Care and Mental Health Services - Medway Review. Tonic

Access to community groups, social and leisure activities

- ‘When asked if there were places for leisure and relaxation in Medway, 58% of participants agreed there was, but many mentioned not being able to access them or didn’t know where they were located.’ MYC Conference Report 2025. Medway Youth Council
- ‘Information can be difficult to access for young people and families. Websites lack a person-centred approach, and information can be difficult to extract. In some cases, information is out of date and inaccurate.’ (Page 4) Comprehensive Mental Health Support for 18-25s- Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin
- ‘13% of respondents mentioned a lack of local groups to get involved in. “Groups for my child. I have tried to find stuff, but there is not much around.”’ (Page 10) How people feel about living in Medway - A spotlight report focusing on Rochester. Healthwatch Medway

Confidence, independence and levels of satisfaction

- ‘Most people (18) would have liked support to build confidence, however only 8 felt that they were given this.’ (Page 1) Listening to feedback about the Reablement service in Medway. Healthwatch Medway
- ‘What mattered to you most when you were being assisted? That I would recover the ability to do everything myself.’ ‘That I was not rushed and communicating with the Carer. Encouraging me to do things independently. Confident carers.’ (Page 6) Listening to feedback about the Reablement service in Medway. Healthwatch Medway
- ‘Focus groups revealed that participants specifically wanted additional help with learning life skills such as self-care, safety in the community, time management and being able to self-advocate. “For me it’s very much about giving her the strategies for the future, for example, selfcare, planning, being able to cope with stress. Being an adult requires time management, responsibility and having relationships with people for example at work that are sometimes difficult.” (13+ focus group)’ (Page 3) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity. Doesn’t specify
- 96% (46 people) of this group said that they didn’t feel confident about monitoring their own blood pressure at home. When asked why they were not confident to monitor blood pressure at home, the most frequent answer was around a lack of confidence in using the home monitor or in understanding what the readings meant.’ Empowering communities to address Hypertension in Medway. EK360
- ‘While some young people were ready to take on responsibility for their own care, others felt overwhelmed and lacking the personal resources to engage independently.’ (Page 23) Comprehensive Mental Health Support for 18-25 s- Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin
- ‘Participants feel overwhelmed, anxious, worried and/or frustrated from something that someone else does and attempt to sort those feelings on their own (29%). School exams, homework and marks/grades were all commonly mentioned as causing these feelings and the majority of respondents who cited these would look to sort it on their own.’ (Page 35) Young Minds, Hidden Struggles: Perceptions of self-harm from Children and Young people, Professionals and the Medway and Swale Community Health Partnership. Healthwatch Medway
- ‘Empowerment themes in the feedback reflect a strong emphasis on confidence, independence, and having a voice. Young people associated empowerment with qualities such as strength, equality, freedom, and the ability to influence decisions. For older participants, empowerment was linked to standing up for yourself, challenging discrimination, and achieving fairness in social and professional settings. For younger children, empowerment was often expressed in aspirational or imaginative terms, such as “feeling like a superhero” or “being in charge”, highlighting developmental differences in understanding. (Pages 8–9, 38–40) Positive Masculinity and Female Empowerment Project – Children and Young People’s Feedback

- ‘Participants felt that the freedom & ownership of being able to book your own appointment is welcomed & makes people with COPD feels involved in choosing their own convenient time for treatments or consultations.’ (Page 23) Improving Services for Chronic Obstructive Pulmonary Disease (COPD) across Medway and Swale. Medway Voluntary Action
- ‘The weighted survey results estimate that 77.7% of Medway adults have high or very high life satisfaction levels. Certain groups in Medway are less likely to have high or very high life satisfaction levels. These groups include: Adults in wards Wayfield & Weeds Wood and Gillingham South, unemployed adults, adults who rent (with or without housing benefit).’ (Page 103) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health

Communication barriers

- ‘Young people also highlighted their difficulty in communicating how they felt. The use of visual aids to support this would be welcomed. Young people often said that staff just sitting with them, without the need to talk or express themselves, was a powerful antidote.’ (Page 25) Local Systems for Supporting Young People Who Need Both Social Care and Mental Health Services - Medway Review. Tonic
- ‘We heard a story about a family needing emergency hospital treatment after their daughter had an accident. The daughter is Deaf and couldn’t communicate where she was in pain to the A&E staff. Her family arrived and had to act as interpreters during the emergency situation, which they told us was very distressing. They had to wait 8 weeks for an interpreter to be provided by the hospital. During this time, the family had to act as interpreters.’ (Page 4) Focus on the Deaf Community in Medway April 2020. Healthwatch Medway
- ‘English lessons not being ability specific makes learning slow.’ (Page 1) Local Asset and Signposting Plan - Medway Help the Ukrainians. Community Health Catalyst Programme

Housing and homelife (For more details see Principle 5)

- “I suffer from anxiety and depression and am constantly worried by my landlord who calls me and visits my home a number of times each day telling me to leave. I cannot register as homeless without an eviction letter from my landlord.” (Page 9) A spotlight report - What did people tell us about housing and homelessness? Mental Health Voice
- ‘It is evident that the housing situation impacts on every other aspect of the lives of these people and ultimately reflects many of the determinants outlined in the indices of multiple deprivation. It is also worth noting the overlap of the core characteristics of the CORE20 PLUS 5 within this cohort – whilst they are categorised as vulnerable due to their housing situation, there are many that identify with mental health issues, are reliant on drugs and alcohol and have an offending history, as well as some being vulnerable migrants.’ (Page 1) Homelessness Listening Event Report. Community Health Catalyst Programme
- Many vulnerable children who have experienced long-term neglect, and those at risk of exploitation and who go missing from home or care, live in situations of actual harm or are at risk of harm for too long. (Page 35) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott

Discrimination (For more details see Principle 7)

- ‘There were a lot of references to the way they are treated by professionals in the health and educational settings, particularly for the non-binary and transgender community. Everyone agreed that many teachers let things slide, such as smiling whilst reprimanding someone telling a ‘gay’ joke, as if they found it funny. There was an example of a school refusing to call a young person by the name they had chosen to reflect their gender identity and another where this change was accepted but became a talking point amongst the

teachers and caused the young person distress. “When I was trans-female – in my old school I was ‘Boy’s Name’ – then trans-female – back to being a boy – they recognise it but won’t let you explore your identity further. People don’t let you be flexible and explore.”’ Be You Project (Chatham Group) Listening Event Report. Community Health Catalyst Programme

- ‘None of the children have entered mainstream school, some may have done a week here and there but not more than that because they are moved on so often. There is no home education, no support, no online resources, no books, no workbooks. Because they didn’t have any education growing up, they don’t know where to start to educate their children. They referenced the fact that every child between 5 and 16 has to be in education, but their children can’t get an education – it isn’t fair. / Being uneducated detrimentally impacts their way of life, for example, when they are served notices to move on, they wouldn’t know if they were legitimate, and they have no-one to assist them. As a result, they move on for fear of the repercussions. Many clever people amongst the Gypsy community, and they would go along way, but they aren’t given the chance, they won’t give the children the chance.’ (Page 2) Gypsy, Roma, Traveller Listening Event Report. Community Health Catalyst Programme

Accessibility of education

- ‘Complex needs is an elusive concept and there are large variations in what kind of problems and needs someone labelled as a person with complex needs may have. This concerns young people having mental ill-health with or without a psychiatric diagnosis, who are also exposed to various and multiple risk factors such as difficulties in completing education, unemployment.’ (Page 7) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott
- ‘The LTP identifies some groups of children and young people with vulnerabilities that need to continue to be prioritised to ensure they are receiving the support they require: young people who are Not in Education Employment or Training. (NEET).’ (Page 34) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott

Gap analysis for Principle 2

From the engagement detailed within the submissions received, the following elements of enabling all children, young people and adults to maximise their capabilities and have control over their lives, have not been covered within submissions received:

- Resilience and wellbeing of young children
- Experiences of school for children and young people
- Experience of lifelong learning for adults to maximise their capabilities and have control over their lives
- Experiences of schools, families and communities work in partnership to reduce the gradient in health, wellbeing and resilience of children
- Experience of children and young people enrichment activities and experiences with their peers
- Experience of children's home and road safety
- Feedback about free school meals and non-free school meals
- Experiences / feedback around apprenticeships
- Experience feedback around young people not in employment, education or training (NEET)
- Experiences / feedback around pupil absences
- Children in care outcomes
- Experience of mentoring schemes for young people
- Experience of digital literacy programmes in libraries and community centres

From the engagement detailed within the submissions received, the following cohorts are represented within this issue mapping under Principle 2. However, it is not possible to state how representative this is of the wider population:

- Young people between 12 and 25 years
- Children in foster care, looked after children
- Neurodiverse children
- Gypsy, Roma and Traveller community
- Parents / carers of children with SEND
- Young people identifying as trans
- Children, young people and adults with mental ill health
- Young people transitioning to adult mental health services

From the engagement detailed within the submissions received, the following cohorts don't appear to be represented within this issue mapping under Principle 2:

- Young people for whom English is a second language
- Young people not in employment, education or training
- Young people and adults on apprenticeships
- Children and young people who are disabled
- Children and young people with learning difficulties
- Young carers

PRINCIPLE 3

Create fair employment and good work for all: Ensure that everyone has access to decent work and fair employment conditions.

To enable the reader to build context to the insights explored within this chapter, the reader is advised to consider the following:

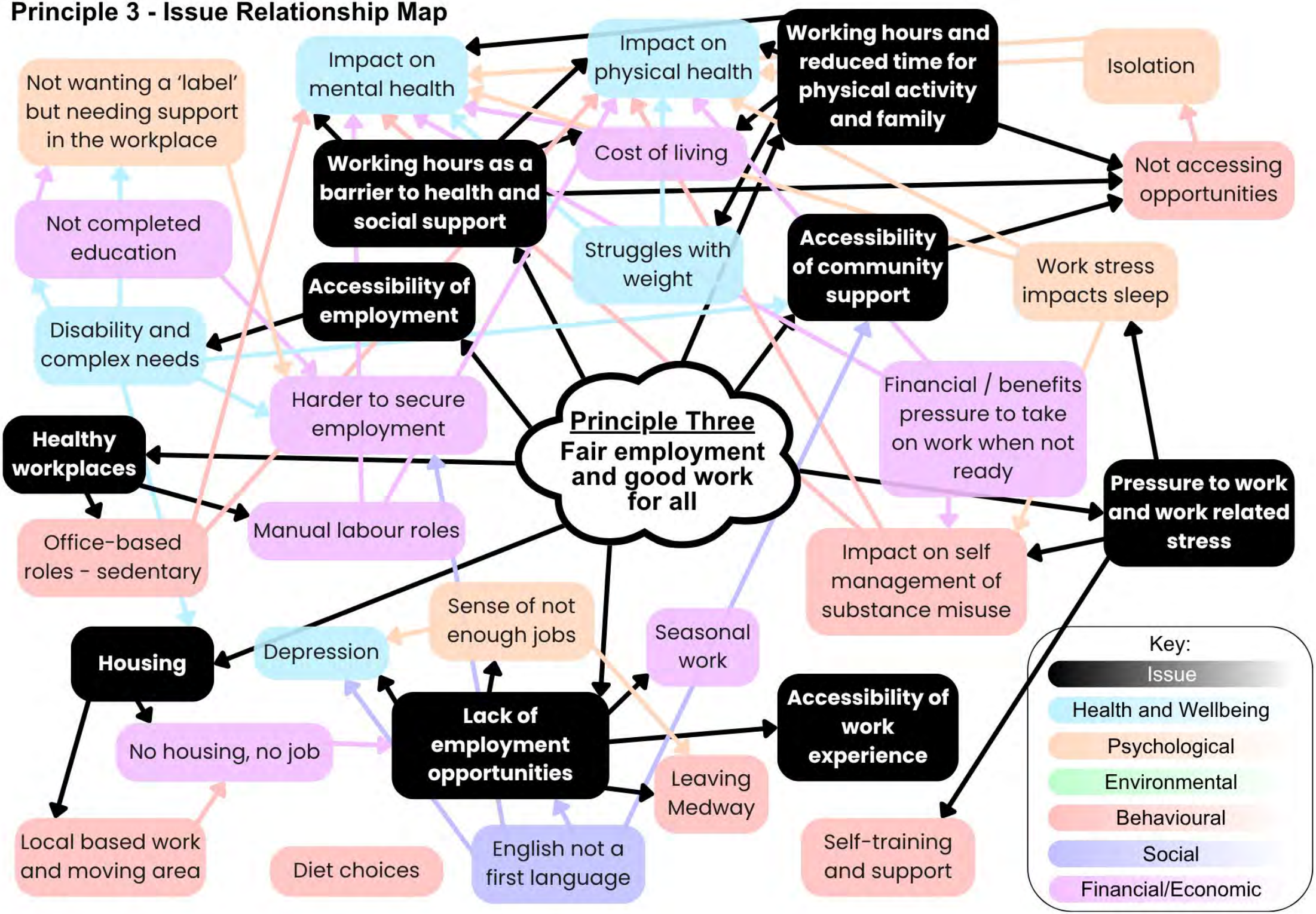
- Source of submissions that have provided insights under this Marmot Principle
- Engagement methodologies used to generate insights
- That issues raised are not quantified in terms of how many people are affected.

Engagement and insight gathering methodologies

Insights that related to this principle were drawn from submissions that used the following methodologies:

Insights gathering methodology	Number of times cited
Public engagement feedback	11
Community visit	11
Focus group feedback	8
Digital, online survey	8
High street engagement	4
Workshop	3
Consultation	3
Conference	1
National data sets, with potential for some randomised controlled trials or non-randomised studies	1

Principle 3 - Issue Relationship Map



Issues raised within the Insights

Working hours reduce time for physical activity and family.

- One of the challenges of trying to lose weight was mentioned to be 'work/life balance' and 'work patterns.' (Pages 14, 27) Living with obesity - A community health research project to explore the practicalities for people living with obesity. Medway Voluntary Action / (Page 15) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity / How people feel about living in Medway - A spotlight report on the Medway Villages of Halling and Cuxton. Healthwatch Medway
- "I probably need to get out more and go for walks. Adjust my work life balance, I work too hard and too much." (Page 17) A spotlight report focusing on the peninsula villages of Allhallows, Cliffe, Cliffe Woods, High Halstow, Isle of Grain and Stoke. Healthwatch Medway
- 'People are working longer hours & don't have the time to look after themselves & their families properly. Lack of regular routine exercises.' (Page 42) Research summary for Medway and Swale clinical commissioning group - Improving diabetes care. Medway Voluntary Action
- 'Poor work-life balance, coupled with the cost-of-living crisis is impacting mental health.' (Page 1) Medway Pride Event, LGBTQIA+ Group. Community Health Catalyst Programme
- 'There was discussion about the number of hours people have to work, lack of flexibility and the impact of this on their work/life balance. "The economic system works against you. The working class grind themselves until they die, with very little to show for it."' (Page 3) Listening Event Report. Community Health Catalyst Programme

Working hours create a barrier to attend health and social support

- 'Classes at different times so that people who work can get there.' (Page 3) Local Asset and Signposting Plan - Medway Help the Ukrainians. Community Health Catalyst Programme; also mentioned in Vulnerable Migrants, Listening Event Report. Community Health Catalyst Programme
- '26% of respondents mentioned a lack of spare time to get involved in local groups. "We own a business, so we don't have much spare time, we're pretty tied up with that."' (Page 12) How people feel about living in Medway - A spotlight report focusing on Rainham and Twydall. Healthwatch Medway
- '20% of respondents mentioned a lack of spare time to get involved in local groups. "I work full-time and I have no spare time, but maybe when I am retired – it's hard enough as it is to fit in my yoga and Pilates."' (Page 11) How people feel about living in Medway - A spotlight report focusing on Strood. Healthwatch Medway
- 'Services available on weekends and during evenings due to work commitments and childcare.' (Page 22) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity; also mentioned in Local Asset and Signposting Plan, Medway Help the Ukrainians. Community Health Catalyst Programme
- 'Services offered on multiple days (rather than every Wednesday for example) to support shift workers.' (Page 23) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity; mentioned in A spotlight report on the Building Blocks of Life, focusing on the locality of Rochester. Healthwatch Medway; and How people feel about living in Medway - A spotlight report on the Medway Villages Halling and Cuxton. Healthwatch Medway
- 'One respondent also suggested having a support group for fathers specifically as: "My husband can't attend groups because he has to work and he does not 'see that they are for him' perhaps a dad's group might help because often he is at a loss what to do."' (Page 44) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity
- "I can't take a day off work for six weeks to attend Zoom meetings nor can my husband." / "Make it more available and we'll know about and at weekends. We can't get to Club Ausome as I have work, I literally can't get him there and it stops running during the

holidays…" (Page 45) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity

- 'Difficult to get a job because English isn't good enough. Takes time to get qualifications that are recognised in the UK. Difficult to attend language classes due to work commitments. A lot of employment rejections affects mental health.' (Page 1) Community Health Catalyst Programme - Local Asset and Signposting Plan - Medway Help the Ukrainians. Community Health Catalyst Programme
- 'Services were not always suitable for working parents to bring their CYP to due to the restricted days and times that they were available. Parents and Carers were asked when they would like to access support for their CYP; 70% said that weekday evenings would be beneficial, 62% said weekdays during the day and 58% said that weekends would be useful.' (Page 45) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity.

Perceived lack of employment opportunities

- '49% of young people believe that there are not enough jobs available for people under the age of 18 in Medway.' (Page 1) MYC Conference Report 2025. Medway Youth Council
- '1 in 4 under 11s told us they worried about their future, getting a good job and being happy when they grow up.' (Page 9) Child-Friendly Medway Annual Report. Medway Council
- '3% mentioned employment: "There is a lack of opportunities here. I want to work and, but it's the lack of opportunities."' (Page 7) How people feel about living in Medway - A spotlight report focusing on Rainham and Twydall. Healthwatch Medway
- "It's still a struggle to get a job even if you live in a nice part of Strood." (Page 7) How people feel about living in Medway - A spotlight report focusing on Strood. Healthwatch Medway
- 'We noticed a tension between young people having high hopes for a good job and career pathway, and a sense that they believed Medway could not offer this to them.' (Page 10) Child-Friendly Medway Annual Report. Medway Council
- "I have applied for over a hundred jobs, I never get interviews. Every Monday I start looking positively, by Friday I am depressed. I eat more and feel bad. I feel let down (by myself)." (Page 2) Vulnerable Migrants, Listening Event Report. Community Health Catalyst Programme
- '41% across all ages felt that a lack of good jobs and few opportunities to pursue their dreams were the main reasons for not wanting to live in Medway in future.' (Page 10) Child-Friendly Medway Annual Report. Medway Council

Accessibility of work experience and volunteering

- '66% claimed they had not yet had the chance to complete work experience, highlighting an important opportunity that isn't being carried out as effectively in all schools.' (Page 11) Medway Youth Council Conference 2025. Medway Youth Council
- '66% have shared their skills with others; 57% feel more confident; 55% visit or see people more often: "Tempo Time Credits is providing opportunities to do new things. Especially as I'm not working and earning much right now, it's a lovely thing to be able to do." (Pages 5 & 6) Tempo Time Credits Involving Medway & Swale. Tempo Time Credits

Accessibility of employment

- '3% of respondents spoke about the accessibility of the area. "I would like to have a job in my area but no one would take me on because of my disabilities."' (Page 13) How people feel about living in Medway - A spotlight report focusing on Rainham and Twydall. Healthwatch Medway
- 'Difficult to get a job because English isn't good enough. Takes time to get qualifications that are recognised in the UK.' (Page 1) Local Asset and Signposting Plan. Medway Help the Ukrainians. Community Health Catalyst Programme

- ‘Difficult to get employment if you have Autism or Cerebral Palsy.’ (Page 3) Medway Pride Event. LGBTQIA+ Group. Community Health Catalyst Programme
- ‘Not wanting the label of SEND or disability, not wanting to apply for PIP [personal independence payment], wanting to work but just having additional needs, wanting support at work. (Paraphrased by Medway Council Staff member.)’ (Page 15) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity
- ‘Work opportunities are seasonal (for building trade), so winter is much harder to get work, which is when the cost of living goes up.’ (Page 3) Homelessness Listening Event Report. Community Health Catalyst Programme

Accessibility of community support groups and activities

- ‘36% of [carers] mentioned a lack of spare time to get involved in local groups. “I’m a carer for my husband and my daughter, so I am fully occupied!”’ How people feel about living in Medway - A spotlight report focusing on Lordswood and Walderslade. Healthwatch Medway
- “I used to help at [X] Academy. I used to read with the children. I can no longer do this as I care for my wife. This has had an impact on me.” (Page 12) How people feel about living in Medway - A spotlight report focusing on Lordswood and Walderslade. Healthwatch Medway
- ‘4% of locals spoken to mentioned that their neurodiversity impacts on their ability to get involved in community groups. “I’m not sure what I can be involved in. I struggle because of my ADHD and don’t know how I can help. I can work but struggle with my neurodiversity as well as using computers and paperwork.”’ (Page 13) How people feel about living in Medway - A spotlight report focusing on Lordswood and Walderslade. Healthwatch Medway

Housing or lack of permanent residence (see Principle 5 for further details)

- “I suffer with a lot of mental and physical health issues; it is also suspected that I am autistic and [have] ADHD … [Last year] I was made homeless through no fault of my own ... I was failed massively by [the] council ... I also lost my job due to this.” (Page 13) What did people tell us about housing and homelessness? Mental Health Voice
- ‘They are [a] family gardening business. They get work where they can, but it is difficult because they don’t stay in the same place for very long to build up a business and a reputation. They do their bit of work when they can, but travellers get less work.’ Gypsy, Roma, Traveller Listening Event Report. Community Health Catalyst Programme
- ‘The women would like to work if they had a permanent residence. You need an ‘address’ to be employed.’ (Page 4) Gypsy, Roma, Traveller Listening Event Report. Community Health Catalyst Programme

Pressure to work and stress

- ‘Some have been told to apply for jobs that aren’t suitable for recovering addicts, harassment / threats that benefits will be stopped. Universal Credit pressurise recovering addicts to do things around their account and searching for work which causes further mental health issues (stress, anxiety, triggers relapse, MH episode).’ (Page 2) Substance Misuse & Drug and Alcohol Dependency listening event report. Community Health Catalyst Programme
- ‘There are high levels of professional anxiety – “Staff feel unskilled to meet need or understand behaviours”.’ (Page 15) Local Systems for Supporting Young People Who Need Both Social Care and Mental Health Services - Medway Review. Tonic
- ‘24% of participants responded that work always or often had an impact on their sleep.’ (Page 30) Waking up to Sleep – Exploring how Medway Sleeps. Healthwatch Medway

- ‘Mental health, physical health and work-related stress were among the most frequently cited factors negatively impacting sleep.’ (Page 4) Waking up to Sleep – Exploring how Medway Sleeps. Healthwatch Medway
- ‘Sleep disparities were evident across employment status, deprivation levels and age groups, with unemployed individuals and individuals from areas of higher overall deprivation more likely to experience poor sleep.’ (Page 4) Waking up to Sleep – Exploring how Medway Sleeps. Healthwatch Medway

Healthy workplaces

- ‘46% of people from Cohort A (has had a frailty assessment) had worked in office-based roles.’ (Page 25) Steady Steps Towards a Solid Future - A report on Medway Resident’s Perceptions of Frailty, Frailty Assessments and the Falls Prevention Service. Healthwatch Medway
- “The feedback shows that people believe work conditions have contributed to ill-health and COPD. People exposed to occupational dust & chemicals.” (Page 12) Improving Services for Chronic Obstructive Pulmonary disease (COPD) across Medway and Swale. Medway Voluntary Action
- “People in poorer communities have low skilled jobs, like cleaners and factory work, where they might be breathing in toxic fumes.” (Page 26) Improving Services for Chronic Obstructive Pulmonary Disease (COPD) across Medway and Swale. Medway Voluntary Action

Gap analysis for Principle 3

From the engagement detailed within the submissions received, the following elements of creating fair and good work for all have not been covered or are limited within submissions received:

- Feedback around the relationship between employment or lack of it to physical and mental health
- Insights around pay (local wage gap between men and women, impact of low pay or cost of living crisis on health outcomes)
- Barriers to and support for long-term unemployment
- People who are disadvantaged in the labour market to attain the skills and training they need to secure and maintain good quality employment
- Healthy workplaces that promote employees' health and wellbeing
- Access to volunteering and training
- Feeback around quality of jobs
- Feedback around stability / longevity of jobs
- Experience of flexible working arrangements for carers and parents
- Job placement services for long-term unemployed

From the engagement detailed within the submissions received, the following cohorts are represented within this issue mapping under Principle 3. However, it is not possible to state how representative this is of the wider population:

- Young people between 12 and 25 years
- Carers
- Neurodiverse young people and adults
- People with a physical disability
- Migrant communities
- Gypsy, Roma and Traveller community
- Working age residents from across Medway

From the engagement detailed within the submissions received, the following cohorts don't appear to be represented within this issue mapping under Principle 3:

- Adults not in employment, education or training
- Adults with learning difficulties

PRINCIPLE 4

Ensure a healthy standard of living for all: Address economic inequalities to provide everyone with a healthy standard of living.

To enable the reader to build context to the insights explored within this chapter, the reader is advised to consider the following:

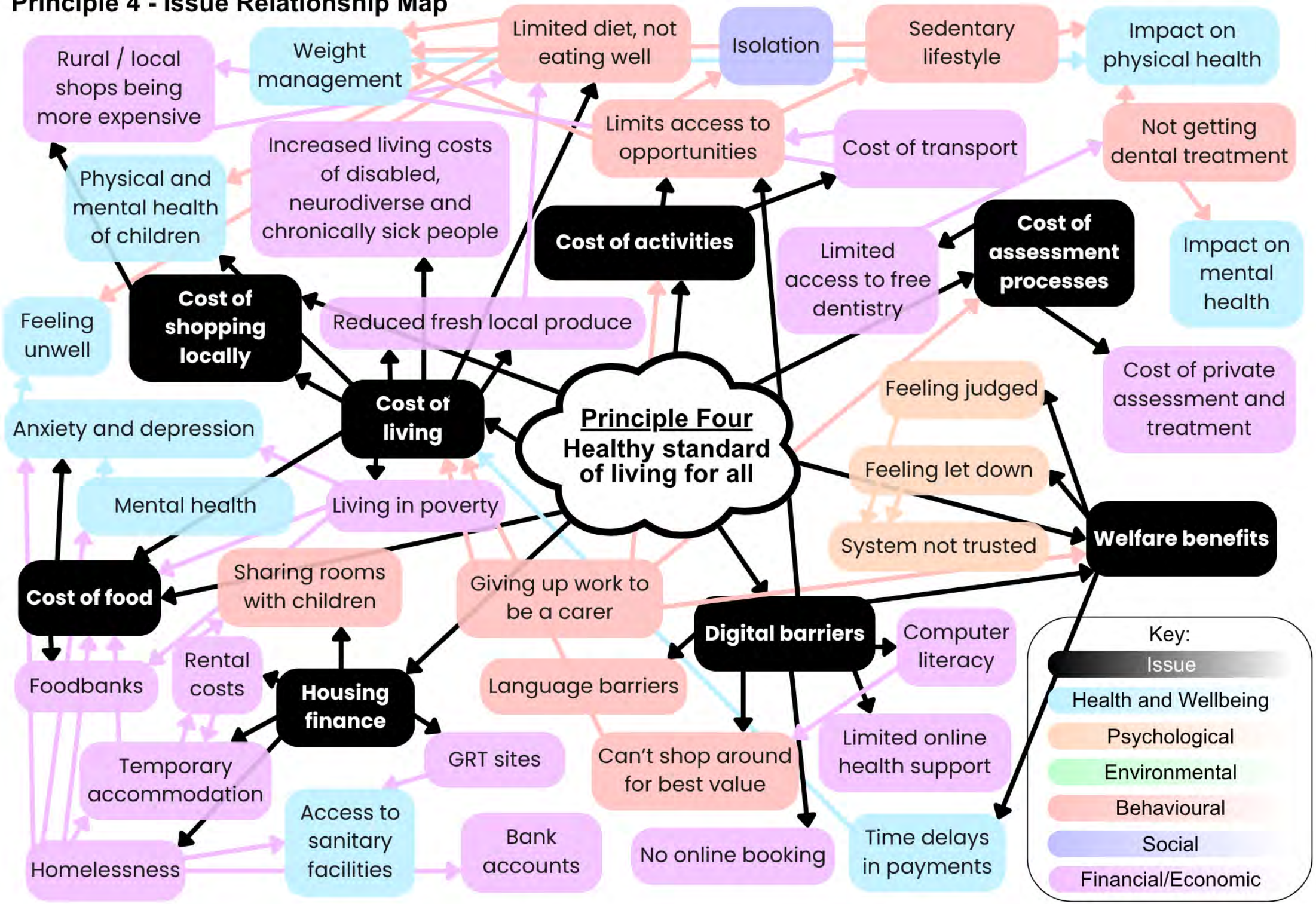
- Source of submissions that have provided insights under this Marmot Principle
- Engagement methodologies used to generate insights
- That issues raised are not quantified in terms of how many people are affected.

Engagement and insight gathering methodologies

Insights that related to this principle were drawn from submissions that used the following methodologies:

Insights gathering methodology	Number of times cited
Public engagement feedback	21
Community Visit	20
Digital, online survey	14
Focus group feedback	14
High Street Engagement	11
Workshop	4
Case studies	2
Consultation	1
National data sets, with potential for some randomised controlled trials or non-randomised studies	1

Principle 4 - Issue Relationship Map



Issues raised within the Insights

The 'cost of living'

- 4% spoke about the cost of living. "Prices are rising and it's getting financially difficult for people to live in Medway." (Page 7) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- 'Cutting back on heating, food, petrol, holidays, toys, social events. Increased costs on utility usage due to child/young person's needs.' Are you feeling overly worried about the cost of living? (part of 'SEND survey comparison'). Medway Parents & Carers Forum
- 'The rising cost of living including fuel, food, mortgage/rent, energy and clothes is making life hard.' Listening Event Report. Community Health Catalyst Programme
- "Mums were also concerned about how their current circumstances associated with the cost of living could affect their children's wellbeing, particularly with regard to poverty-related stress... It will affect them when it comes to schooling and how they kind of grow themselves." (Page 4) Supporting young parents and their children to overcome adversity. M&S HaCP
- 'People with learning disabilities are more likely to experience mental health problems, have poorer health, and much more likely to live in poverty than the general population.' (Page 19) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott
- Families with a child with a disability- 'Many of our families are on a tight income, as the cost of raising a child with disabilities is higher than that of an average family. Being able to offer free activities makes a huge difference and means that families do not miss out because of finances.' (Page 20) Child-Friendly Medway, Annual Report. Medway Council

Cost of food

- 'Housebound people may not be able to get to food banks, but there isn't a service to provide the food. They do not have money for online shopping and cannot access the food bank. Strood does not have a service that is visible' (Page 17) Listening to feedback about the Wellbeing Navigation service in Medway. Healthwatch Medway
- Mums were also concerned about how their current circumstances associated with the cost of living could affect their children's wellbeing, particularly with regard to poverty-related stress. "There are so many mums and dads at the moment who are using food banks and struggling to make ends meet. And that in itself, on its own, is a huge stress that we carry, and children can pick that stress up. I think if someone is living in poverty, that will come back on the child because they might see their parents not cook as much for themselves - and that child will take on that emotional side. It will affect them when it comes to schooling and how they kind of grow themselves." (Page 4) Supporting young parents and their children to overcome adversity. M&S HaCP
- Reasons for food insecurity - physical ability, transport links, isolation, affordable transport, cost of food, employment opportunities, housing, living wage, benefits and pensions, knowledge and skills, access to cookery equipment, domestic situation, access to food, high food prices, caring responsibilities, substance abuse, lack of culturally diverse food options. (Page 5) Food Waste Log Tree. University of Greenwich
- 'Financial issues cause stress and anxiety, some people saying they are always concerned about money, this also affects the food they can afford to eat which is indicated in physical and emotional health issues described above. "I feel ill because I don't get the correct nutrition. My doctor tells me to reduce cholesterol and salt, but my diet is limited, and I can't afford everything I need, and I can't cook. I often eat takeaways but can afford to all the

time."' (Page 3) Medway and Swale Health and Care Partnership – Engagement inequalities report. M&S HaCP

- "Lower income people may not have the money to vary their diet." (Page 4) Research summary for Medway and Swale clinical commissioning group- Improving diabetes care. Medway Voluntary Action and Involving Medway and Swale
- "Many people rely on cheaper food options and sometimes skip meals and eat lots of bread, pasta, potatoes etc to fill themselves up." (Page 34) Research summary for Medway and Swale clinical commissioning group- Improving diabetes care. Medway Voluntary Action and Involving Medway and Swale
- "People already know the benefits of healthy eating but some turn to less healthy options because they are cheaper." (Page 12) Let's talk about food and nature in Medway- highlights from survey responses. University of Greenwich
- When asked what the biggest challenges were for someone trying to lose weight, '66 per cent of participants discussed affordability, e.g. purchasing healthy food, memberships for gyms/swimming pools, and appropriate equipment for exercise.' (Page 9) Involving Medway & Medway South PCN Pilot – Engaging with harder to reach service users. Medway Voluntary Action
- 'Certain groups in Medway are less likely to eat five portions of fruit and vegetables a day. These groups include: Adults in wards Chatham Central & Brompton, Strood West, and Gillingham South, males, adults living in areas of high deprivation (quintiles 1 and 2), adults who rent (with or without housing benefit).' (Page 19) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health
- 'The weighted survey results estimate that 11.4% of Medway adults sometimes or often do not have enough food due to finances. Certain groups in Medway are more likely to not have enough food due to finances. These groups include: Adults in MPA PCN and Medway Central PCN, adults in wards Chatham Central & Brompton, Strood West, Wayfield & Weeds Wood, Gillingham North, Gillingham South, and Hoo St Werburgh & High Halstow, adults aged 18 to 34 years old, adults living in areas of high deprivation (quintiles 1 and 2), unemployed adults, adults who rent (with or without housing benefit).' (Page 26) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health
- 'The weighted survey results estimate that 6.4% of Medway have reduced the size of meals or skipped meals due to finances. Certain groups in Medway are more likely to reduce meals due to finances. These groups include: Adults in wards Chatham Central & Brompton, Wayfield & Weeds Wood, Gillingham South, and Hoo St Werburgh & High Halstow, adults aged 18 to 34 years old, adults living in areas of higher deprivation (quintile 2), unemployed adults, adults who rent (with or without housing benefit.) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health

Financial implications of accessing community activities

- 'It would be good if you could get a weekly prescription to use a gym if you can't afford to go otherwise. That's why I really like the gyms that they have in parks – they're brilliant and make a big difference. I think they should get used more.' (Page 20) Steady Steps Towards a Solid Future - A report on Medway Resident's Perceptions of Frailty, Frailty Assessments and the Falls Prevention Service. Healthwatch Medway
- 'Participants said that the increase in cost of living meant it was more important than ever for local groups/activities to be affordable.' (Page 7) Medway Local Joint Health and Wellbeing Strategy (JLHWS) - Qualitative Findings and Recommendations from Survey and Focus Group Engagement. Health and Wellbeing Board
- '8% of locals mentioned money being a barrier to them getting involved in local groups. "We live not too far from the new Cozenton park. It looks good, but I am not sure about the costs to join or go there. To be honest, I am not sure I can afford it, which is a shame."' (Page 12)

How people feel about living in Medway - A spotlight report focusing on Rainham and Twydall. Healthwatch Medway

- '6% of Strood locals mentioned money being a barrier to them getting involved in local groups. "I would like to do something like maybe yoga or pilates, but it needs to be free. I am going now to the community hub to see what freebies they have for retired people. Where my sister lives, they have all sorts of free activities for pensioners!"' (Page 12) How people feel about living in Medway - A spotlight report focusing on Strood. Healthwatch Medway
- '7% of locals mentioned money being a barrier to them getting involved in local groups. "I rely on taxis, which means I can't leave anywhere at 3.30 because of the school run, and it's also really expensive. It cost me £16 just to come here today, but if I didn't come then I probably wouldn't go anywhere and I would feel lonely. It's frightening really."' (Page 13) How people feel about living in Medway - A spotlight report focusing on Lordswood and Walderslade. Healthwatch Medway

Financial implications of shopping locally

- "Cost of parking to go to the shops. Stops me shopping locally. Should be free so there is more support." (Page 5) How people feel about living in Medway - A spotlight report focusing on Hempstead, Wigmore and Parkwood. Healthwatch Medway
- '6% spoke about "The shops - we don't have a huge choice. They are expensive as they are like corner shops. We could do with a Co-op like in Grain." "Not a decent supermarket, only little corner shops which are not that friendly, don't have a great selection of products and are expensive."' (Page 10) A Spotlight Report How people feel about living in Medway A spotlight report focusing on the peninsula villages of Allhallows, Cliffe, Cliffe Woods, High Halstow, Isle of Grain and Stoke. Healthwatch Medway
- 'I don't like shops in Hoo; they are too expensive therefore I have to take a taxi to Strood to do my food shop."' (Page 13) A Spotlight Report- How people feel about living in Medway focusing on the peninsula villages of Chattenden, Hoo, Upnor and Wainscott. Healthwatch Medway
- 'Fruit and veg are expensive. Many people are reliant on corner shops with less choice and quality.' (Page 6) Let's talk about food and nature in Medway- highlights from survey responses. University of Greenwich
- 'Disappearance of town markets (which provided fresh produce), the cost of healthy foods has increased and access has decreased.' (Page 6) Let's talk about food and nature in Medway- highlights from survey responses. University of Greenwich

Housing related finance

- '5% spoke about their housing. "There should be a rent cap on private renting, it'll give people more opportunity to get on the property ladder." (Page 7) How people feel about living in Medway- A spotlight report focusing on Rainham and Twydall. Healthwatch Medway
- "It is hard to find suitable accommodation. The cost of renting has become unaffordable. I have to share a room with my child." (Page 3) Medway and Swale Health and Care Partnership – Engagement inequalities report
- "Some are working and paying taxes but can't afford accommodation – one is living in his car. When trying to get accommodation they (the vulnerable migrants) are discriminated against because of their nationality, especially since the war in Ukraine." (Page 3) Homelessness Listening Event Report. Community Health Catalyst Programme
- "Street homeless can't get new birth certificates easily or other documents. Housing requires a long record of bank statements, but this is unrealistic for some homeless people." (Page 17) Listening to feedback about the Wellbeing Navigation service in Medway. Healthwatch Medway

- ‘This person with lived experience of domestic abuse needed a speaker of her first language. “I can only get help from this [charity]. I am worried about how I am going to survive as I do not have enough money. I have no one else to help me. My family do not live in this country.”’ (Page 6). A spotlight report - What did people tell us about housing and homelessness? Mental Health Voice
- “Some have to pay top up on their accommodation and can’t afford it, they can’t afford to pay bills. One had to pawn his phone so had no way of contacting people.” (Page 3) “One person reported using his money to pay for a B&B to get some sleep and a shower but then has little left for food etc.” (Page 3) Homelessness Listening Event Report. Community Health Catalyst Programme
- ‘They have insufficient access to sanitary facilities, they prefer to use public toilet and shower facilities for hygiene purposes, they prefer not to use the ones in their caravans as it is not hygienic, they do not have a contact water supply and waste disposal is difficult. “Some garages refuse to let them have water, some supermarkets won’t let them in to use the toilets, and a local sports centre charged them £10 per person for a shower. For ladies especially this can be incredibly stressful. We want to have our own place – a home – to be part of a community”’ (Page 2) Gypsy, Roma, Traveller Listening Event Report. Community Health. Catalyst Programme
- One reported that both his physical and mental health has deteriorated over 18 months whilst trying to sort financial problems. (Page 4) Homelessness Listening Event Report. Community Health Catalyst Programme

Digital barriers

- ‘One attendee mentioned technology barriers. “A lot of us don’t have computers and everything is online. It can be hard for people to access. There should be paper forms.”’ (Page 10) A Spotlight Report On The Deaf Community In Medway. Healthwatch Medway
- “Internet connection is a big factor in bridging the gap of inequalities, giving everyone the same opportunities. Part of the internet is upskilling people to become computer literate, as this will open up a host of opportunities from applying for benefits, jobs, services”’ (Page 41) Medway Local Joint Health and Wellbeing Strategy (JLHWS) - Qualitative Findings and Recommendations from Survey and Focus Group Engagement. Health and Wellbeing Board
- Many don’t know how to do things like apply for different housing or benefits... ‘For those when English is not their first language, completing forms is difficult.’ (Page 3) // ‘Some are not very computer literate.’ (Page 3) Homelessness Listening Event Report. Community Health Catalyst Programme
- ‘Online forms for appointments to do not work for those who do not have digital access, or those with limited digital skill and therefore acts as a barrier to access.’ (Page 4) Medway and Swale Health and Care Partnership – Engagement inequalities report. M&S HaCP
- Additionally, this group discussed the difficulty in navigating online portals to view their options when it comes to reduced energy costs. ‘Energy companies try to signpost them to view their options to reduce costs via online portals, however due to difficulty in navigating, they end up giving up and paying much higher bills due to digital divide.’ (Page 18) Medway Local Joint Health and Wellbeing Strategy (JLHWS) - Qualitative Findings and Recommendations from Survey and Focus Group Engagement. Health and Wellbeing Board
- Participants felt that the lack of accessible and tailored diabetes resources and services leaves some people excluded. One participant said "How are people without internet access or tech accessing these diabetes support programs? Everything seems to be online." (Page 3) North Central London and Medway and Swale focus groups insights. Diabetes UK

- A key theme that emerged was digital exclusion. There was a 'heavy reliance on online resources and programmes, which exclude people without internet access or digital skills.' (Page 32) North Central London and Medway and Swale focus groups insights. Diabetes UK
- 'It is difficult because they have to do things online and can only access the internet in the community centres, some are not very computer literate.' (Page 3) Homelessness Listening Event Report. Community Health Catalyst Programme
- "It would be a nice thing if you had even posters outside to say oh, this is available. They can't always access the Internet because some people, especially when they're older, don't do Internet and don't do technology on phones." (Page 18) Medway Local Joint Health and Wellbeing Strategy (JLHWS) - Qualitative Findings and Recommendations from Survey and Focus Group Engagement. Health and Wellbeing Board

Welfare benefits

- 'If you go somewhere like the Gateway you have to tell them what is going on and all they want is proof and to see your bank accounts, it feels like you are being judged'. (Page 16) Finding and understanding the needs of 'hidden unpaid carers' in Medway. Healthwatch Medway
- Many don't know how to do things like apply for different housing or benefits, one reported that Universal Credit were not accepting their sick notes, so their money had been stopped. They don't trust anyone because they are always being let down, their calls are not returned, and they feel they are lied to. Homelessness Listening Event Report. Community Health Catalyst Programme
- When trying to sort financial issues, 'the system makes it difficult' 'The system tries to break people, so they give up.' (Page 4) Homelessness Listening Event Report. Community Health Catalyst Programme
- 'One has been out of prison for 3 months and has not received the right amount of payments.' (Page 3) Homelessness Listening Event Report. Community Health Catalyst Programme
- 'I have had to give up my career due to the lack of support available from services' (Page 2) Are you feeling overly worried about the cost of living? (part of 'SEND survey comparison'). Medway Parents & Carers Forum
- 'Living in a low-income household or with a parent in receipt of income-related benefits was associated with higher rates of mental disorder in children.' (Page 18) System review of children and young people accessing specialist mental health services across Medway - literature review. Matthew Scott

Being able to afford to pay for assessments and appointments

- 'Five Parents and Carers also reported opting for self-funding the support that their CYP needed due to difficulties with accessing locally funded services.' (Page 40) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity
- "I had a private consultation with a private dentist, however they have charged me a ludicrous and unaffordable price, so I need help finding an NHS dentist to get the work done." (Page 5) Focus on Dentists. Healthwatch Medway
- "I've got money, have been saving up, but can't get an NHS appointment. It's not fair. I can't afford private healthcare; I'm on disability benefit and that's not covered for dentist." (Page 5) Focus on Dentists. Healthwatch Medway
- '50% (14) of people said that the costs of dental services had stopped them getting treatment.' (Page 6) Focus on Dentists. Healthwatch Medway
- 'Unable to afford the cost of getting to checks.' (Page 29) Research summary for Medway and Swale clinical commissioning group- Improving diabetes care. Medway Voluntary Action and Involving Medway and Swale

Gap analysis for Principle 4

From the engagement detailed within the submissions received, the following elements of ensuring a healthy standard of living for all, have not been covered or are limited within submissions received:

- Feedback around income levels for healthy living for people of all ages
- Experience of changes in income around moves to and from benefits and employment / training
- Experience around interactions between low income and health, i.e. mental health, suicide, disability-related living costs and challenges
- Feedback around personal health budgets / PA employment etc
- Types of digital interventions people are accessing / not accessing
- Experience of interventions to reduce long-term unemployment
- Experience of food banks, home cooking, meal preparations
- Feedback around the energy efficiency of housing, 'heating or eating'
- Homelessness, rough sleeping, sofa surfing
- Housing, overcrowding
- Barriers to rental / issues with rental properties
- Barriers to affordable housing initiatives and rent controls
- Experience of access to affordable childcare services
- Experience of minimum income guarantees or basic income pilots

From the engagement detailed within the submissions received, the following cohorts are represented within this issue mapping under Principle 4. However, it is not possible to state how representative this is of the wider population.

- Low-income families
- Carers
- Neurodiverse young people and adults
- Migrant communities
- Gypsy, Roma and Traveller community
- Working age residents from across Medway
- Families with children/ young person with SEN
- People who are homeless

From the engagement detailed within the submissions received, the following cohorts don't appear to be represented within this issue mapping under Principle 4:

- Adults not in employment, education or training, including long term unemployed
- Adults with learning difficulties
- People with a physical disability who employ a PA
- People in receipt of welfare benefits
- People living in houses of multiple occupation

PRINCIPLE 5

Create and develop healthy and sustainable places and communities: Foster environments that promote health and well-being.

To enable the reader to build context to the insights explored within this chapter, the reader is advised to consider the following:

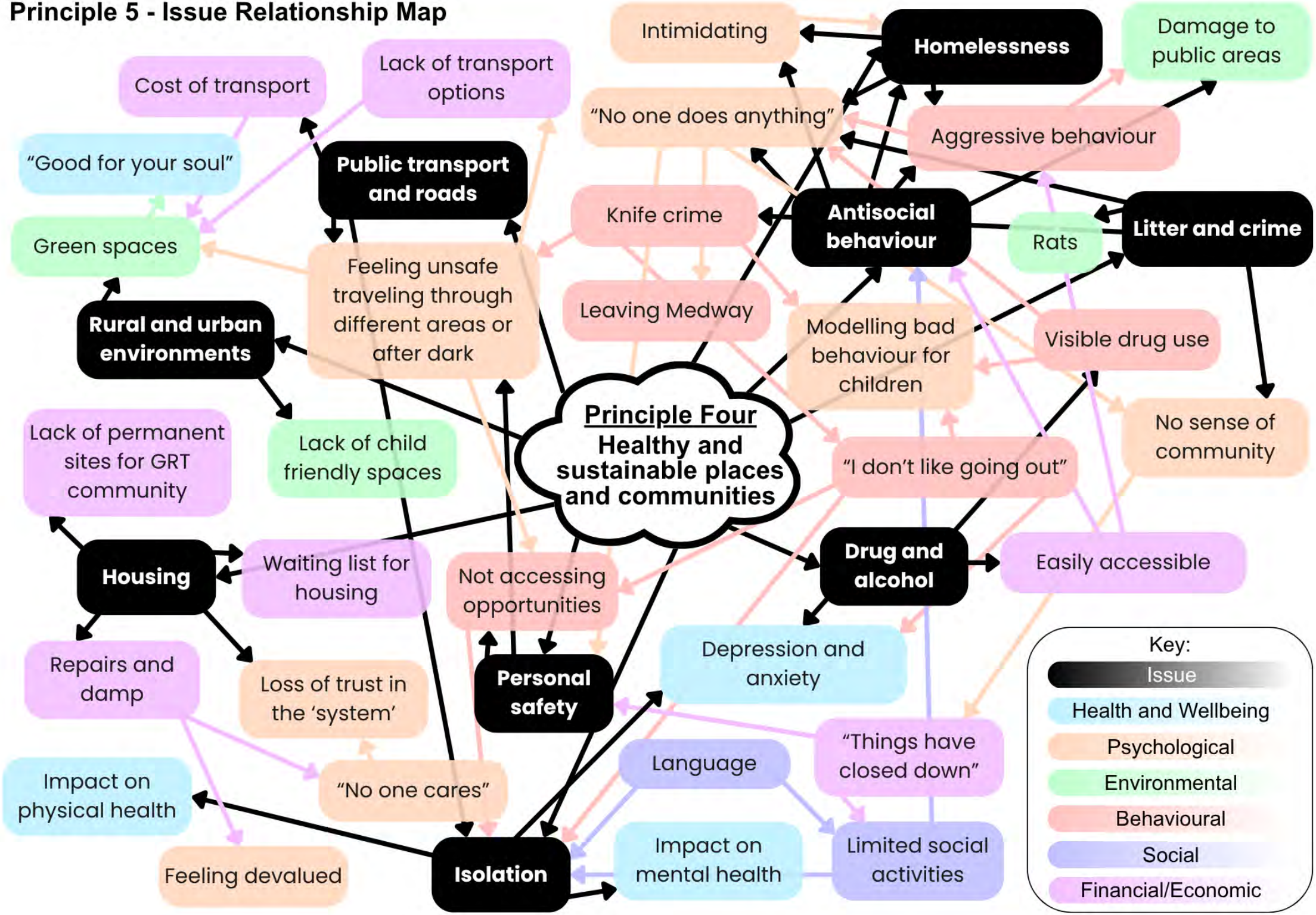
- Source of submissions that have provided insights under this Marmot Principle
- Engagement methodologies used to generate insights
- That issues raised are not quantified in terms of how many people are affected.

Engagement and insight gathering methodologies

Insights that related to this principle were drawn from submissions that used the following methodologies:

Insights gathering methodology	Number of times cited
Public engagement feedback	24
Community Visit	24
Digital, online survey	16
Focus group feedback	15
High Street Engagement	11
Workshop	6
Consultation	4
National data sets, with potential for some randomised controlled trials or non-randomised studies	2
Case studies	1
Conference	1

Principle 5 - Issue Relationship Map



Issues raised within the Insights

Public transport and road networks

- The discussions around transport concluded that students found buses and trains in Medway to be unreliable and expensive. They reported frequent issues with digital tickets not reading through the ticket machines and crowded buses during periods after school. This has often led to young people not being able to travel home straight away after school, not being able to travel at all, and causing apprehension when using these services. As a result, young people told us they were unable to access a lot of the opportunities available to them because they were too far from home. Medway Youth Council Conference Report 2025. Medway Youth Council
- "Poor public transport provision in the evenings limiting opportunities to travel to socialise or attend entertainment venues including gyms." (Page 6) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- "If I didn't drive, I would have to get two buses." (Page 12) Steady Steps Towards a Solid Future - A report on Medway Resident's Perceptions of Frailty, Frailty Assessments and the Falls Prevention Service. Healthwatch Medway
- 30% mentioned that the infrequency and lack of public transport had a negative impact. (Page 6) How people feel about living in Medway- a spotlight report focusing on the peninsula villages of Chattenden, Hoo, Wainscott, and Upnor. Healthwatch Medway
- 'Rural communities are losing transport links. Transport links may not be able to break even in these areas. Someone who was once independent and self-sufficient may then be a victim of isolation.' (Page 17) Listening to feedback about the Wellbeing Navigation service in Medway. Healthwatch Medway
- People with a disability, '6% mentioned that the accessibility of the area had a positive impact on residents liking where they live. (Page 4) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- People with a disability, '13% mentioned the barrier of unreliable public transport. "The buses are a joke, especially for someone that's disabled." (Page 10) How people feel about living in Medway- a spotlight report focusing on Gillingham. Healthwatch Medway
- "The buses are terrible; I also wouldn't want [my children] travelling alone on public transport after dark." (Page 23) How people feel about living in Medway- A spotlight report on the Medway Villages Halling and Cuxton. Healthwatch Medway
- "It feels isolating, you feel trapped. I work in Grain, but it limits options where you can work as you need a car to go further as you can't guarantee you'll be able to get back home - and a taxi back is too expensive." (Page 11) A Spotlight Report How people feel about living in Medway A spotlight report focusing on the peninsula villages of Allhallows, Cliffe, Cliffe Woods, High Halstow, Isle of Grain and Stoke. Healthwatch Medway

Antisocial behaviour

- "I do not want to go back to my home because of my neighbours. I am close to a breakdown. I live in social housing surrounded by people with serious problems and antisocial behaviour. I want to move but cannot afford to buy my own place. There does not seem to be anyone I can turn to for help. I will call Release the Pressure." (Page 8) A spotlight report - What did people tell us about housing and homelessness? Mental Health Voice
- "The youth behaviours really aren't good, and they don't have anything to do these days. Kids are really horrible to the homeless." (Page 9) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway

- “The area has gotten rowdier with the kids, we live near Broomhill Park where they congregate, and they can be a bit aggressive." (Page 22) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway
- "There's nothing for the kids to do. They throw things at my door, and they burnt it. They have no respect.” (Page 22) How people feel about living in Medway- A spotlight report focusing on Lordswood and Walderslade. Healthwatch Medway
- "We’ve now got really bad problems with antisocial behaviour, which have been reported time and time again, but nobody does anything. The police say it's down to the housing association to deal with because it's coming from their tenants. [The housing association] just won't do anything though. Some of the residents set up a group to try and get them to listen but we got nowhere. My mental health is really bad as a result of having to live like this. I'm scared of going out, but I'm scared of being indoors." (Page 9) A spotlight report - What did people tell us about housing and homelessness? Mental Health Voice
- “Within the Luton area, street drinking, litter and antisocial behaviour are commonplace 24/7 365, the behaviour of these individuals is directly fuelled by the proliferation of business selling cheap, strong and high-volume alcohol. Take a walk from Luton Primary School where you can collect your first alcoholic drink from […] at 6am, then 150m meters down the road to […] at 7:30am, 150m meters down the road to […] for 6am, 250m down the road to […] for 8am, 150m meters down the road to[…] for 8am.” (Page 31) Public Health Cumulative Impact Assessment. Medway Public Health
- ‘The majority of respondents in both 2022 and 2023 stated that licensed premises contributed towards alcohol related problems in their area. The areas most commented on in both surveys were: Gillingham, Chatham, Rochester, Luton, Strood.’ (Page 26) Public Health Cumulative Impact Assessment. Medway Public Health

Litter

- ‘60 people mentioned littering as a negative factor, 62% (37) of these were female and 38% (23) were male.’ (Page 6) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway
- “I think Chatham is really dirty and a lot of the people there are questionable. It's filthy. The council don't do anything. There's rats everywhere. It makes you depressed. The dirt around, ashtrays just don't get used, it's all on the ground.” (Page 6) How people feel about living in Medway - A spotlight report focusing on Chatham. Healthwatch Medway
- ‘13% of residents spoke about the amount of rubbish left around the area having a negative impact on them liking the area.’ (Page 6) How people feel about living in Medway - A spotlight report focusing on Chatham. Healthwatch Medway
- ‘Rubbish from takeaways is often strewn across the streets. Litter is a problem in Medway.' (Page 6) Let’s talk about food and nature in Medway- highlights from survey responses. University of Greenwich

Crime

- '5% of residents mentioned seeing an increase in the amount of crime in the area. “Crime is really going up. My road in particular has seen an increase.”' (Page 5) How people feel about living in Medway - A spotlight report focusing on Rochester. Healthwatch Medway
- 5 (3%) people mentioned knife crime, with 80% (4) of mentions coming from those who identify as female, and 20% (1) from those who identify as male.
- “All the stabbings it's not safe, I don't want to bring my children out. I don't go out anywhere by myself, this is the first time in two weeks. I don't even go to my mum and dad's even

though its right around the corner." (Page 21) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway

- 'The two largest age cohorts who mentioned knife crime were people aged between 16 and 24 years (2 mentions) and those aged between 25 and 34 years, both making up 40% of knife Percentage of vandalism feedback.' (Page 22) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway and Medway Youth Forum Annual report
- Medway has fourteen neighbourhoods ranked in the 10% most deprived and thirty-seven in the 20% most deprived nationally. Medway appears to fair worst in the crime domain, ranking in the most deprived 10% of local authorities nationally for crime. Public Health Cumulative Impact Assessment. Medway Public Health

Personal safety

- '16% (27) of people we spoke to mentioned they avoid certain places during the evening or at night. 89% (24) of this cohort identified as female and 11% (3).' (Page 10) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway
- 33% of young people said they did not feel safe in Medway, many mentioned a collective anxiety to use the highstreets due to anti-social behaviour and poor lighting – especially in the evenings and at night. Participants felt 'uneasy' going out as they said they might get 'harassed in the streets. Some spoke about having to 'wear clothes to fit in and not stand out' as a safety net to deal with their concerns.' With specific reference to Chatham and Gillingham Highstreets. MYC Conference Report 2025. Medway Youth Council
- 19% (5) of mentions regarding evening avoidance came from residents of Gillingham. These comments mention locking doors and residents making sure they are 'secure after dark'. (Page 13) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway
- '46% of locals mentioned the negative impact of crime and anti-social behaviour in the local area.' How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- "The anti-social crime is worrying, it puts pressure on me and stresses me out. It takes my health down, that's the only way I can describe it." "I really don't feel safe on the high street if I am on my own, and not safe at all once it is dark." (Page 5) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- '19% of people specifically mentioned the night-time economy as a source of negatively impacting on how they feel about living in the area. "I wouldn't come down to the high street in the evening past 7pm. There are always police around and someone always has a knife and I am disabled so that scares me." "The yobby side... the drunks, shouting all weekend, all the noise. I avoid the high street of an evening, I wouldn't feel safe."' (Page 5) How people feel about living in Medway - A spotlight report focusing on Rochester. Healthwatch Medway
- 'There were concerns around personal safety in Gillingham, some people are scared to go out alone, these fears are perpetuated by the media.' (Page 3) Community Health Catalyst Programme – Listening Event Report
- '26% of people mentioned where they live can be isolating. "You know there will be problems if you go out. So, you avoid meeting up, even if it's a simple meet up." "Sometimes you'd like to just go and have a drink on a weekend, but usually you avoid Rochester High Street." "It makes me not want to come out and I won't come out on an evening on my own and especially not on a Friday or Saturday night."' (Page 13) A spotlight report on the Building Blocks of Life, focusing on the locality of Rochester. Healthwatch Medway
- "It does affect people, kids are scared, you are nervous to go out." Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway

- [Young People] told us they felt less safe in the wider community. 'This extended into town centres, shopping areas and other public spaces. These spaces, particularly high streets, could often feel intimidating and scary with anti-social behaviour, drugs, alcohol and litter being reasons people gave for avoiding these areas.' (Page 9) Child-Friendly Medway Annual Report. Medway Council
- 'Social relationship transition support for teens - supporting with becoming more independent and managing e.g. safety in the community. Teenage services as a gap – for 'high functioning' teens that just need a bit of support with living independently, adulthood, drug awareness, safety etc.' (paraphrased by Medway Council staff member). (Page 14) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity
- "I won't go out on my own at night as I am too worried/frightened." "You don't like to see it. It is better now than before, but it is not nice to see this in a place meant for children. You do not want your children to see it, to think that behaviour is okay. It is not a good environment." "This makes me scared to go out both at night and during the day. I will usually only go out if I am with friends, like I am today." (Page 12) How people feel about living in Medway- A spotlight report focusing on the Medway town of Gillingham. Healthwatch Medway

Drug and alcohol related behaviours

- "Problems with alcohol and drugs are increasing, like by the train station, which is at the end of my road. We see dealers but the police don't do much, no-one is looking after the street. It does affect people, kids are scared, people don't want to leave their homes if they know dealing is going on. You are nervous to go out. Even when you are watching TV, you hear the cars screech along the street and know what it means. It is becoming normalised, and it shouldn't be." (Page 11) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway
- '20% mentioned the impact of the use of drugs and alcohol in the area and how it negatively impacts how they feel about living in the area. "The drugs. My children are exposed to drugs."' (Page 5) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- 13% mentioned the use of drugs and alcohol in the area. "There is also a big drug problem with lots of addicts out on the street." (Page 5) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- 'Medway Council Business Intelligence team shows within overall crime, the 'violent crime' category has the greatest number of reported cases, followed by 'anti-social behaviour'. Both types of crime are associated with alcohol consumption.' (Page 10) Public Health Cumulative Impact Assessment. Medway Public Health
- 'Public Space Protect Orders (previously Alcohol Control Zones) to control the drinking of alcohol in public, have been in place for many years in Chatham and Luton, Rochester and Gillingham. These orders are in place due to the recognised issue of alcohol related anti-social behaviour.' (Page 7) Public Health Cumulative Impact Assessment. Medway Public Health
- "Problems in the area include drink/drug driving including cars performing stunts (people openly sit in their cars in side streets smoking and taking drugs, day and night), noise from drunks walking home regularly wakes me, chucking litter in the street and also peoples gardens including mine, vomiting, smashing glass bottles (so I have to be careful that my dog doesn't walk on the broken glass), hanging around in groups smashing bus stops and other street furniture, this is particularly bad after the local pubs close, especially at weekends and during good weather." (Page 6) Public Health Cumulative Impact Assessment. Medway Public Health
- 'Girls were twice as likely as boys to report feeling unsafe in Medway.' (Page 9) Child-Friendly Medway Annual Report. Medway Council

- ‘Children and young people have told us they want to feel safe in parks, high streets, and the local area where they live, that they do not like anti-social behaviour or anything that stops them from enjoying their community spaces.’ (Page 9) Child-Friendly Medway, Annual Report. Medway Council
- Women: ‘49 people mentioned personal safety as a negative factor, with 82% (40) of these being female and 18% (9) male.’ (Page 9) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway

Homelessness

- “Sometimes Rochester High Street can feel a bit dicey with the homeless people there, it's ok at the present, but it can be intimidating especially if you are a woman on your own." (Page 13) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway
- “There are a lot of homeless people. There are some rough areas that I don't like to be around after dark. Sort of similar to parts of London in that regard.” (Page16) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway
- '5% mentioned issues with homelessness in the area. “I witnessed a couple of homeless guys getting into a drunken fight in the middle of the day. It gives a bit of an aggy vibe to the place.”' (Page 5) How people feel about living in Medway- A spotlight report focusing on Rainham and Twydall. Healthwatch Medway
- '14% mentioned issues with homelessness in the area. “Homelessness is still visible, and the problems that come with it.”' (Page 5) How people feel about living in Medway - A spotlight report focusing on Strood. Healthwatch Medway
- ‘Safety was a priority amongst many of the people that we spoke to, they have experienced violence towards them whilst on the streets due to the way they look and at weekends especially (when the town - Chatham – is busy) they hide, because they are easy targets. Many have been beaten up or mugged. Even in temporary accommodation, they can be picked on by the more aggressive residents, but they cannot get help to move because there is a shortage of accommodation.’ Homelessness Listening Event Report. Community Health Catalyst Programme
- ‘The biggest issue is feeling safe, I have nowhere to live and think it might be better to go back to prison – in many ways it would be easier to do that because it is safe with regular meals.’ (Page 2) Homelessness Listening Event Report. Community Health Catalyst Programme
- 7% mentioned issues with homelessness and beggars in the area. "Poor people lying on the streets, something needs to be done, but the council turn a blind eye." (Page 5) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- “About three months ago I attempted to end my life. A lot of my family died during covid, and I don't really have any friends or family. I was made homeless after losing my job for a number of months. I’m temporarily sleeping on a friend’s sofa and attempting to get back into work again." (Page 6) A spotlight report - What did people tell us about housing and homelessness? Mental Health Voice
- “We lost everything, the flat, our belongings – we were on the street – homeless. We slept in stairways, buildings, and our car – until it got burnt out. That was because we were robbing and stealing from everyone. Several people became homeless due to marriage breakdowns or eviction, while others spoke about spending time in prison and then, on release, finding it difficult to find a secure place to live.” (Page 5) Listening to the voices of people who live with the challenges of addiction and who are - or have - experienced being homeless. M&S HaCP
- "I feel sorry for the homeless – you walk one end of the high street to the other and you see them.”' (Page 19) How people feel about living in Medway- A spotlight report focusing on the Medway town of Gillingham. Healthwatch Medway

- Personal hygiene was identified as a significant issue, being clean and having something warm to wear or somewhere dry to store their belongings. In addition, it is hard to get constant good nutritional food. For those living on the streets the winter months have been particularly hard. It gets really cold. 'One person was living in a tent and wakes with bugs in his tent, when it is wet the tent lets in water and his blankets and sleeping bag gets wet and he cannot get them dry. He also had his tent vandalised and belongings stolen. Another rough sleeper said he gets bites and rashes on arms and legs from sleeping outside.' (Bottom of page 1 / page 2) Homelessness Listening Event Report. Community Health Catalyst Programme

Housing

- "I've been on the waiting list for accommodation for over 250 days. I'm a care-leaver and they told me that the waiting list was 65 days. I'm currently in temporary accommodation." (Page 7) How people feel about living in Medway – A spotlight report focusing on Chatham. Healthwatch Medway
- The biggest issue and the one that affects all aspects of their life is the fact that they do not have a permanent site that they can call home. 'They explained that they are constantly being moved on and usually have between 3 days and 2 weeks in any one location. To prevent them returning, sometimes bollards are put in place to block access to previous sites.' (Page 2) 'They are adamant that they want to be able to maintain their heritage, they don't want to be housed, they just want a piece of land to call our home. They have money to purchase land, but this keeps getting blocked and planning permission is refused.' Gypsy, Roma, Traveller Listening Event Report. Community Health Catalyst Programme
- All participants had issues with housing, and this significantly impacts on their lives. There were specific examples about accommodation not being fit for purpose and just get fobbed off by housing. Some had no dedicated housing officer. Some felt that housing don't care, they don't want to help once you are housed even if not appropriate, so they have lost trust with housing. Some have been housed in inappropriate accommodation given that they are in recovery – they are housed with users and dealers which is triggering and makes them at risk of relapsing and they don't feel safe. (Page 1) Community Health Catalyst Programme - Substance Misuse & Drug and Alcohol Dependency listening event report. Community Health Catalyst Programme
- "[The housing association] still need to sort out the leak from the upstairs flat and the mould." (Page 7) How people feel about living in Medway - A spotlight report focusing on Strood. Healthwatch Medway
- 'Poor housing was mentioned- poor ventilation resulting in moulds thus polluting the atmosphere, as well as poor hygiene- allowing dust to build up on surfaces- that caused wheezing and coughing.' (Page 26) Improving Services for Chronic Obstructive Pulmonary disease (COPD) across Medway and Swale. Medway Voluntary Action
- 'Some said that their houses were very old, with poor ventilation and insulation- there was a sense of desperation from those living in old social housing.' (Page 29) Improving Services for Chronic Obstructive Pulmonary disease (COPD) across Medway and Swale. Medway Voluntary Action
- 'Particularly in the homeless and GRT communities, hygiene has been identified as a barrier to people's health and wellbeing: Access to clean water is not always available for GRT communities, access to showers is not always available for GRT communities and the homeless community, ability to wash clothes and availability of clean clothes for the homeless community.' (Page 5) Medway and Swale Health and Care Partnership – Engagement inequalities report. M&S HaCP

Social isolation

- ‘We can see that more males within all age groups reacted to the advert about feeling loneliness and isolation than the advert that asked, “who is looking after you, whilst you look after someone.”’ (Page 11) Finding and understanding the needs of ‘hidden unpaid carers’ in Medway. Healthwatch Medway
- ‘Isolation made people feel alone, lost and separated from others, not being understood and trapped in a sense of tormented silence.' (Page 5) Listening to the voices of people who live with the challenges of addiction and who are - or have - experienced being homeless. M&S HaCP
- “It’s a lonely, horrible and sad place out there – not only out there, but also in your mind – being an addict is fucking shit.” (Page 6) Listening to the voices of people who live with the challenges of addiction and who are - or have - experienced being homeless. M&S HaCP
- 'Discussed as a vicious cycle that leads to isolation and unhappiness, and whilst getting outside in nature would help, they feel afraid to, or can’t be bothered to leave the house, so it is difficult to help themselves. For some their lack of English has made it difficult to make new friends, so they are experiencing loneliness and isolation. The impact of the pandemic was also discussed.' (Page 4) Community Health Catalyst Programme – Listening Event Report. Community Health Catalyst Programme
- "Loneliness and isolation aren’t considered for our people but we suffer a lot. We don’t understand the language, so would like more people to talk to.” (Page 4) Community Health Catalyst Programme – Listening Event Report. Community Health Catalyst Programme
- “Medway is lacking on LGBT services – especially when trying to find things for young people, this could be improved and would definitely ease the social anxiety for young people. A lot of queer spaces are adult based. More LGBTQIA+ young people events so more people would come together and they could meet new people, also bespoke activities such a queer football / inclusive football or other sports, such as badminton.” (Pages 3 & 4) Be You Project (Chatham Group) Listening Event Report. Community Health Catalyst Programme
- 'The weighted survey results estimate that 6.3% of Medway adults often feel socially isolated, 18.0% feel socially isolated some of the time, and 75.7% never feel socially isolated. 121 out of 3,594 survey respondents did not answer this question.' (Page 122) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health
- 'The weighted survey results estimate that 24.3% of Medway adults feel isolated often or some of the time. Certain groups in Medway are more likely to feel isolated. These groups include: Adults in MPA PCN, adults in wards Chatham Central & Brompton, Gillingham North, and Gillingham South, adults aged 85 and over, unemployed and economically inactive adults, adults who rent (with or without housing benefit).’ (Page 127) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health
- ‘Certain groups in Medway are more likely to feel lonely. These groups include: Adults in wards Rainham North and Gillingham South, adults aged 85 and over, economically inactive adults, adults who rent (with or without housing benefit).’ (Page 133) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health
- Elderly people – ‘For the elderly, loneliness, isolation and lack for care and support was identified and a significant issue impacting their quality of life and mental health, in addition frailty and memory problems are compounding this, making them feel vulnerable. “I’m always forgetting things now I’m older, I have early onset of dementia, and am struggling to remember things.”’ (Page 2) Community Health Catalyst Programme – Listening Event Report. Community Health Catalyst Programme
- “I just keep myself to myself, but it’s the overall effect on everyone. It’s isolating. You exist in your own bubble, no connections. You wake up and got to go into town, but it doesn’t make you feel good.” “It can be a bit lonely because I don’t know anyone around here.”’ (Page 14) How people feel about living in Medway - A spotlight report focusing on the Medway town of Gillingham. Healthwatch Medway

- “My home has become a prison because of the daily ASB, violence and noise outside. Whoever agrees these licences, along with the councillors in charge should be forced to live next to one of the many HMOs and bail hostels that this council have allowed to infect what was once a lovely community.” (Page 32) Public Health Cumulative Impact Assessment. Medway Public Health

Urban environments

- “When there's less stuff to do like youth centres, more bad stuff happens. When there's less activities they turn to bad things. You don't want to just be sat around.” (Page 12) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- "There could be more around where I live - a lot of things have closed down or knocked down. There used to be the bingo but that's closed down now, which is a shame.” (Page 13) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- ‘17% spoke about urban decay. “There's nothing new and lots of things have closed down.” “The high street, there are lots of derelict shops. I wouldn't usually come down here.”’ (Page 6) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- ‘20% spoke about the lack of amenities and how that negatively impacts how they feel about living in the area. “We need more shops and a bigger variety of shops.” “Shame there are no banks left on the High Street.”’ (Page 6) A spotlight report on the Building Blocks of Life, focusing on the locality of Rochester. Healthwatch Medway

Green spaces

- ‘34% of residents mentioned that the green and open spaces increase their level of satisfaction of where they live. “I enjoy the countryside. You can walk around the river, pick blackberries, go paddling in the river. Such a beautiful place -good for the soul. Makes you want to get up in the morning. You cope with life better living somewhere like this.”’ (Page 3) How people feel about living in Medway - A spotlight report focusing on Rochester. Healthwatch Medway
- ‘Feedback given on what prevents people from accessing green spaces more often - lack of time, poor transport links, safety concerns, accessibility issues (paths and facilities), lack of toilet facilities, lack of awareness of green space locations, lack of seating and rest areas, parking, lack of child friendly facilities.’ (Page 3) Access to Green Spaces in Medway Survey (PDF)
- ‘The weighted survey results estimate that 40.5% of Medway adults live within a 5 minute walk of greenspace, 43.0% live within 5 to 10 minutes, 12.6% live within 10 to 20 minutes, 2.3% live within 20 to 30 minutes, and 1.7% live 30 minutes or more away from greenspace.’ (Page 33) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health
- ‘Medway’s children and young people also told us how they care deeply about their places and spaces, talking about how these can be cleaner and greener, about perceptions of safety in high streets, and about our parks could be even more family-friendly. They also shared that they would like us to plant more trees and flowers and look after wildlife.’ (Page 13) Child-Friendly Medway Annual Report. Medway Council

Gap analysis for Principle 5

From the engagement detailed within the submissions received, the following elements of creating and developing healthy and sustainable places and communities, have not been covered or are limited within submissions received:

- Feedback around social isolation, connectivity with community, definition of community
- Feedback around access to community-based health prevention initiatives
- Feedback around obesity
- Feedback around quality of housing
- Feedback around access to healthy diets fresh food - food growing opportunities and cookery skills
- Feedback around community assets and strengths

From the engagement detailed within the submissions received, the following cohorts are represented within this issue mapping under Principle 5. However, it is not possible to state how representative this is of the wider population.

- Young People between 12 and 25 years
- Carers
- Neurodiverse young people and adults
- People with a physical disability
- Migrant communities
- People who are homeless
- Gypsy, Roma and Traveller community
- Working age residents from across Medway
- Older adult residents from across Medway

From the engagement detailed within the submissions received, the following cohorts don't appear to be represented within this issue mapping under Principle 5:

- People living in social housing / temporary accommodation/ privately rented properties
- People with learning disability

PRINCIPLE 6

Strengthen the role and impact of ill-health prevention: Focus on preventive measures to reduce the incidence of illness and promote overall health.

To enable the reader to build context to the insights explored within this chapter, the reader is advised to consider the following:

- Source of submissions that have provided insights under this Marmot Principle
- Engagement methodologies used to generate insights
- That issues raised are not quantified in terms of how many people are affected.

Engagement and insight gathering methodologies

Insights that related to this principle were drawn from submissions that used the following methodologies:

Insights gathering methodology	Number of times cited
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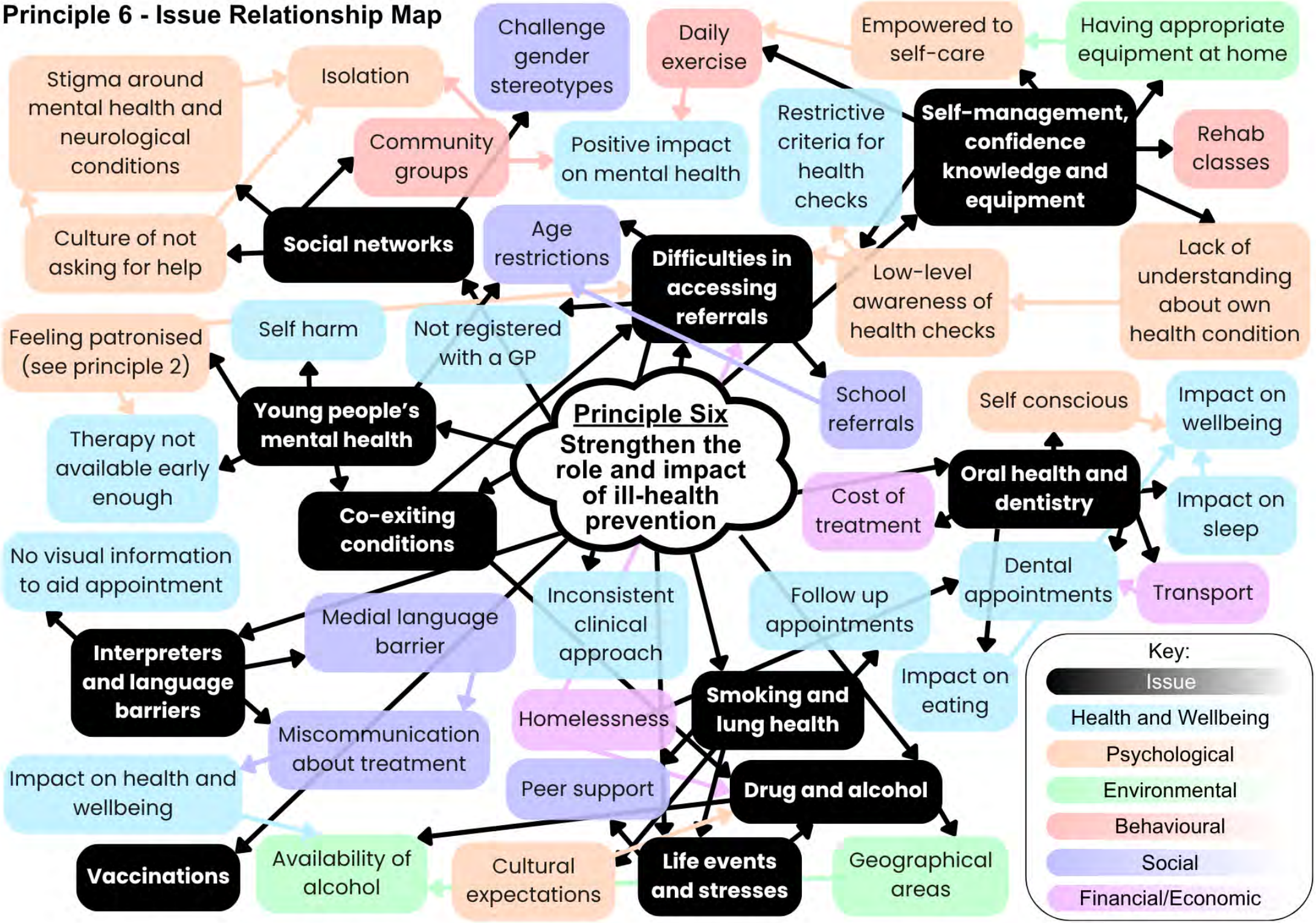
National data sets, with potential for some randomised controlled trials or non-randomised studies	2

Principle 6 - Issue Relationship Map



Issues raised within the Insights

Impact of having an existing condition on health prevention

- ‘I was seen by the crisis team after taking an overdose. The person I spoke with said there was nothing they could do due to substance misuse issues. I abuse substances because of my poor mental health. How do I break the cycle without mental health support.’ (Page 9) The Experience of Mental Health Services from those with Drug and Alcohol issues. Healthwatch Kent and Healthwatch Medway
- ‘Nine different service users have noted that their poor mental health and drug or alcohol issue influence each other and being turned away and not being able to access mental health services has led to them not tackling their drug and alcohol problem.’ (Page 9) The Experience of Mental Health Services from those with Drug and Alcohol issues. Healthwatch Kent and Healthwatch Medway
- ‘The main worry was associated with the pre-condition of access to services, demanding that people no longer take substances to be eligible for support. People found the requirement incongruent with the notion of compassion and having a proper understanding of what addiction is really about.’ (Page 7) Listening to the voices of people who live with the challenges of addiction and who are - or have - experienced being homeless. M&S HaCP

Impact of life experience and community on health prevention

- ‘29% mentioned that getting involved in community groups has a positive impact on their mental health. “I think it’s an integral part of it, when things go fine it’s good but you need to have support systems and be more widely spread. When you’ve been through shit you can guide others and you get a huge sense of well-being when you know you’re being helpful.’ (Page 10) How people feel about living in Medway- A spotlight report focusing on Hempstead, Wigmore and Parkwood. Healthwatch Medway
- ‘One person painfully described how he felt the source of his addiction was because he was sexually abused as a child. “So, the reason I ended up here was because of multiple abuse scenarios – as a kid from nine years old, I was sexually abused by a neighbour. Another person spoke about how he began smoking and sniffing petrol because his dad wasn’t there for him soon after his grandfather died, “I started doing drugs when I was about 12, selling them at 13 – I was just crying out for attention because dad wasn’t there.”‘ (Page 4) Listening to the voices of people who live with the challenges of addiction and who are - or have - experienced being homeless. M&S HaCP

Interpreters and language barriers

- ‘25% of the Deaf Club attendees (5) mentioned how medical language can be a barrier to understanding health and social care professionals.’ (Page 6) A Spotlight Report On The Deaf Community In Medway. Healthwatch Medway
- ‘The second most frequently mentioned topic was miscommunication and the impact on poorer health outcomes, in terms of miscommunication, poor treatment plans and a lack of information and understanding about medical conditions for patients.’ (Page 6) A Spotlight Report On The Deaf Community In Medway. Healthwatch Medway
- ‘10% of people (2) spoke about the physical barrier of no information screens in services. This makes it hard for Deaf people to know when their appointment is, as they may not be able to hear their name being called out.’ (Page 10) A Spotlight Report On The Deaf Community In Medway. Healthwatch Medway

Self-management, confidence, knowledge and equipment

- 'If I don't go out each day and if I were to stay at home, I would suffer straight away, I think it's really important to keep moving. Try and get out of the house everyday, move a bit.' (Page 18) Steady Steps Towards a Solid Future - A report on Medway Resident's Perceptions of Frailty, Frailty Assessments and the Falls Prevention Service. Healthwatch Medway
- "There are a lack of neuro-diversity facilities and a lack of awareness from people. A lack of support and understanding. It makes me withdraw into myself. Neurologically yes I think it has an impact on me. I know people to talk to but, I was at a point once where I was considering jumping onto the tracks of Rainham train station due to a lack of understanding with my family and a lack of support for neuro-diversity." (Page 13) How people feel about living in Medway - A spotlight report focusing on Rainham and Twydall. Healthwatch Medway
- "Was very grateful that XXX was at our home to meet me when the two ambulance crews brought me home. Was also very grateful to him for showing me the exercises that I should be doing and for his advice and support generally." (Page 6) Listening to feedback about the Reablement service in Medway. Healthwatch Medway
- "Wonderful to have all necessary equipment ready at my home for when I arrived from the hospital. Great to have the support of XX and the team of lady enablers." (Page 8) Listening to feedback about the Reablement service in Medway. Healthwatch Medway
- "As a carer, I did not know where to turn and what the next steps should be to get the right support. The Wellbeing Navigator Service was invaluable to getting the right support and equipment to support mobility around the home." Listening to feedback about the Wellbeing Navigation service in Medway. Healthwatch Medway
- "We do classes that they have set up, exercise classes. The more exercise I do the more the fitter my lungs get. Pulmonary rehab classes. Twice a week classes. The fitter their muscles are the less oxygen they need." (Page 16) Improving Services for Chronic Obstructive Pulmonary Disease (COPD) across Medway and Swale. Medway Voluntary Action
- 'The Sikh community rarely reach out for help when symptoms are identified, preventing early intervention, and resulting in a longer-term burden on the system with high levels of preventable lifestyle generated health conditions.' (Page 1) Listening Event Report. Community Health Catalyst Programme
- 'Only 4 out of 22 knew about health checks and have been offered them by their GP surgery.' (Page 32) Research summary for Medway and Swale clinical commissioning group - Improving diabetes care. Medway Voluntary Action and Involving Medway and Swale
- The health checks offered by Medway Public Health team, although were taken up by some of the community groups, people found the criteria too restrictive which straightaway ruled out some vulnerable people. (Page 32) Research summary for Medway and Swale clinical commissioning group - Improving diabetes care. Medway Voluntary Action and Involving Medway and Swale
- Community champions and Hypertension Heroes were trained to convey awareness raising and educational information to people in a conversational style approach. 78% (248) of people gave feedback on what they found most motivating about seeing a Hypertension Hero. The most frequently mentioned themes were: Understanding what blood pressure is and why it's important. 'It's been really good to have the time to sit here and have you talk to me about the importance of keeping an eye on my blood pressure. Now I understand what I should think about it and look after it.' Empowering communities to address Hypertension in Medway. EK360

Social Networks

- ‘73% of people involved in community groups believe that being involved has an impact on their health and wellbeing.’ (Page 3) How people feel about living in Medway- A spotlight report focusing on the peninsula villages of Allhallows, Cliffe, Cliffe Woods, High Halstow, Isle of Grain and Stoke. Healthwatch Medway
- ‘33% mentioned that getting involved has a positive impact on their mental health. “Because I lost my husband and daughter this has given me a big out and about situation to socialise and help out. I don’t sit at home and wonder what to do, it keeps my mood lifted.’ (Page 11) How people feel about living in Medway - A spotlight report focusing on Lordswood and Walderslade. Healthwatch Medway
- “Our community stigmatise mental/neurological health conditions, and we are taught to not speak about it and suffer in silence. Only through work, did I become aware of it being acceptable.” (Page 2) Listening Event Report. Community Health Catalyst Programme
- The feedback strongly calls for increased mental health awareness and comprehensive teacher training to better support pupils, particularly around empathy and understanding of conditions such as ADHD and ASD (pages 43, 46). There is also a clear emphasis on harm prevention through proactive education that challenges harmful gender stereotypes and addresses toxic masculinity, ensuring schools create safer and more inclusive environments for all students (page 3). Positive Masculinity and Female Empowerment Project – Children and Young People’s Feedback
- ‘Physical and mental health impacts on their ability to get involved. “Because of my anxiety and fibro, the pain is restricting.” “I used to go to Aqua Fit, but I lost confidence after Covid and didn’t go back.” (Page 13) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- “Busy places are difficult for me, but I am awaiting therapy... anxiety stops me.” (Page 10) How people feel about living in Medway - A spotlight report focusing on Rochester. Healthwatch Medway

Oral health and dentistry

- ‘57% (16) of people said that being unable to find a dentist had an impact on their physical or mental wellbeing. With 44% (7) saying they were unable to eat certain foods, 31% (5) saying it made them self-conscious and 25% saying that impacted on their sleep and stress levels.' (Page 6) Focus on Dentists. Healthwatch Medway
- ‘The weighted survey results estimate that 77.8% of Medway adults report being registered with a dentist. Certain groups in Medway are less likely to be registered with a dentist. These groups include: Adults in Medway Central PCN and MPA PCN, adults in wards Luton, Chatham Central & Brompton, Gillingham North, Gillingham South, and Hoo St Werburgh & High Halstow, males, adults aged 25 to 34 years old, adults from minority ethnic backgrounds, adults living in areas of high deprivation (quintile 1), adults whose highest qualification achieved is level 7 or 8, unemployed adults, adults who rent (with or without housing benefit).’ (Page 58) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health
- ‘Certain groups in Medway are more likely to report experiencing teeth or mouth pain. These groups include: Adults in wards Lordswood & Walderslade, Strood Rural, Watling, Wayfield & Weeds Wood, Gillingham North, and Gillingham South.’ (Page 24) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health
- Feedback on reasons for poor oral health - inadequate transport links, lack of dental service access, understanding consequences of poor oral health, lack of education, cost of treatment, cost of products, cost of healthy food and drinks, genetic factors and chronic conditions, domestic violence, SEND & disabilities, mental health, substance misuse,

physical activity, smoking & alcohol, homelessness, housing situation/facilities, prisons/youth offending/probation, asylum seekers' language barriers. (page 7) Food Waste Log Tree. University of Greenwich

Young people's mental health

- '41% of professionals recognised that there was an overall increase in self-harm in children and young people but did not give specific examples of trends or habits.' "We have noticed a lot more cutting." "A lot more eating disorder." Self-care is deteriorating amongst neurodiverse young people, as is risky behaviour. Self-harm and suicidal ideation are increasing in this group." (Page 43) Young Minds, Hidden Struggles: Perceptions of self-harm from Children and Young people, Professionals and the Medway and Swale Community. Healthwatch Medway
'Almost all of the young people we spoke to told us they had experienced difficulties with their emotional wellbeing or their mental health in the past, and 80% had sought help or tried to access support at least once.' (Page 15) Comprehensive Mental Health Support for 18-25s- Kent and Medway review 2021. Dr Amanda Carr, Matthew Scott, and Daisy Elvin
- 'Many relayed feeling patronised or put down by staff and having their difficulties minimised. For example, young people felt dismissed when their mental health needs were explained as being hormonal or 'normal' age-related mood fluctuations, a response many had experienced.' (Page 16) Comprehensive Mental Health Support for 18-25s- Kent and Medway review 2021. Dr Amanda Carr, Matthew Scott, and Daisy Elvin
- 'Many reported that no follow-up or check-in contact had taken place after they been in contact with the crisis team. Young people felt this further belittled their situation and demonstrated they had not been listened to or taken seriously.' (Page 16) Comprehensive Mental Health Support for 18-25s- Kent and Medway review 2021. Dr Amanda Carr, Matthew Scott, and Daisy Elvin
- 'There was a sense that earlier interventions or preventative work could have been beneficial – for example that therapy was needed earlier on for the individual.' (Page 29) Local Systems For Supporting Young People Who Need Both Social Care and Mental Health Services- Medway Review. Tonic
- "I honestly feel failed by the mental health team as not only could they have supported me mentally through this and aided me in developing the tools I need to help myself moving forward but they could have helped in making a difference with my housing situation, which would have also taken some of the stress off in turn aiding my mental health." (Page 13) A spotlight report - What did people tell us about housing and homelessness? Mental Health Voice
- 'Mental health and emotional wellbeing were mentioned across several focus groups and by 79% of respondents in the Parent and Carers survey. Some respondents to the survey highlighted threatened and actual self-harm and suicide attempts, while the 13+ survey respondents discussed anxiety and depression and mental health as the most often mentioned challenge. Loneliness was also raised.' (Page 3) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity

Difficulties in accessing referrals and assessment routes

- 'Young people and families felt that their age and mental health needs often made it too difficult for young people to engage with and access services in the manner in which they were expected to.' (Page 3) Comprehensive Mental Health Support for 18-25s- Kent and Medway review 2021. Dr Amanda Carr, Matthew Scott, and Daisy Elvin
- 'For undiagnosed or unassessed young people, we were told that it is hard to get access to therapy, find the right placement and agree the funding. A lack of a formal CAMHS assessment leaves social workers holding the risk in an uninformed way.' (Page 33) Local

Systems for Supporting Young People Who Need Both Social Care and Mental Health Services- Medway Review. Tonic

- 'We were told that young people with suicidal behaviours do get seen quickly after an incident but often cannot get planned help to meet identified needs in the usual run of things.' (Page 35) Local Systems for Supporting Young People Who Need Both Social Care and Mental Health Services- Medway Review. Tonic
- 'The weighted survey results estimate that 98.0% of Medway adults report being registered with a GP. Certain groups in Medway are less likely to be registered with a GP. These groups include: Adults in Medway Central PCN, adults in wards Luton, Rochester East & Warren Wood, St Mary's Island, and Chatham Central & Brompton, adults from minority ethnic backgrounds, adults living in areas of high deprivation (quintile 1), adults who rent (with or without housing benefit).' (Page 52) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health
- Barriers to services included: 'age restrictions, requirement for school to support referral can cause issues, pathway difficult to access without a social worker.' (Page 21) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity.
- 'Ten respondents made comments relating to mental health and self-harm. Five respondents reported that their CYP experienced mental health difficulties, and there were also four reports of CYP threatening to self-harm or actually self-harming. The types of self-harm varied, ranging from biting the skin from their fingertips to threats of suicide as well as actual suicide attempts.' (Page 33) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity
- "The referral process is rough. The wedge of physical papers is daunting and actually hard to access. Children with adhd generally have parents with adhd and I felt as if we were being set up to fail from the outset. I realise services are stretched to the max, however I feel that "family diagnosis" would be beneficial. I'm undiagnosed myself and share many of the same traits." (Page 49) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity
- 'Accessing health services at the right time is a need that appears to be an issue for people and has an adverse effect on both physical and mental health. For those without a fixed address, Primary Care services are not available and therefore the only solution for these people is to go to A&E.' (Page 4) Medway and Swale Health and Care Partnership – Engagement inequalities report. M&S HaCP
- 'A lack of consistency in approach to care, seeing different professionals and getting different responses as well as clinicians not having up to date knowledge which causes inconsistency.' (Page 5) Medway and Swale Health and Care Partnership – Engagement inequalities report. M&S HaCP
- 'Access to mental health services were deemed essential to support the overall health and wellbeing of homeless communities…They explained that the difficultly in receiving professional support has worsened their mental health including increased anxiety and depression.' (Page 14) Medway Local Joint Health and Wellbeing Strategy (JLHWS) - Qualitative Findings and Recommendations from Survey and Focus Group Engagement. Health and Wellbeing Board
- '88% of Mental Health Voice feedback highlighted issues of service eligibility (entry requirements being a barrier to begin receiving treatment and support) for children and young people. This cohort had experienced negative interactions with children and young people's mental health services (CYPMHS), mental health crisis services and specialist mental health services. All of this feedback presented children and young people struggling with self-harm as being left stranded by services without effective signposting.' (Page 44) Young Minds, Hidden Struggles: Perceptions of self-harm from Children and Young people, Professionals and the Medway and Swale Community. Healthwatch Medway

Smoking and lung health

- ‘There is help out there to stop smoking, but more help is needed as to what actually works and follow-up appointments would also help.’ (Page 29) Improving Services for Chronic Obstructive Pulmonary Disease (COPD) across Medway and Swale. Medway Voluntary Action
- ‘Greater publicity that smoking causes COPD and awareness around it causing lung cancer is good.’ (Page 30) Improving Services for Chronic Obstructive Pulmonary Disease (COPD) across Medway and Swale. Medway Voluntary Action
- ‘Take the fear out of a COPD diagnosis, by meeting up with other sufferers in a relaxed, non-medical setting to discuss their real life experiences. Coping with COPD is not just physical, but takes its toll on mental health as well, confidence suffers, and anxiety increases.’ (Page 32) Improving Services for Chronic Obstructive Pulmonary Disease (COPD) across Medway and Swale. Medway Voluntary Action
- ‘The weighted survey results estimate that 15.7% of Medway adults are smokers. Certain groups in Medway are more likely to smoke. These groups include: Adults in wards Luton, Rochester East & Warren Wood, Chatham Central & Brompton, Strood West, Wayfield & Weeds Wood, and Gillingham South, adults living in areas of high deprivation (quintiles 1 and 2), adults whose highest qualification achieved is level 1 or 2, unemployed adults, adults who rent (with or without housing benefit) or live rent free.’ (Page 78) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health
- ‘The weighted survey results estimate that 5.4% of Medway adults report using an e-cigarette or vaping regularly. Certain groups in Medway are more likely to be using an e-cigarette or vaping regularly. These groups include: Adults in Medway Peninsula PCN, adults in wards All Saints, Strood West, Wayfield & Weeds Wood, and Hoo St Werburgh & High Halstow, adults aged 18 to 34 years old.’ (Page 16) Medway Health and Wellbeing Survey-Vaping Analysis. Medway Public Health
- ‘Participants were also asked about their awareness and use of the Medway Stop Smoking Service. 11 participants (37%) reported they were aware of the service but only 4 (13%) had attempted to access it. Among those who had used the service, 1 participant (3%) found it effective in helping them to stop smoking, though ultimately relapsing.’ (Page 16) Smoking Insights - Eastern European Communities in Medway. EK360
- “Once I gave up for several months. I started again because I felt stressed, and I feel relieved after smoking. I started again when we came to Medway – it was cold, wet, it wasn’t home. I felt depressed in England.” (Page 28) Smoking Insights - Eastern European Communities in Medway. EK360
- ‘All 30 participants (100%) demonstrated an awareness of smoking’s health risks. Despite this, 15 participants (50%) reported having no concerns or anxieties about their smoking. 15 participants (50%) expressed health-related concerns.’ (Page 19) Smoking Insights - Eastern European Communities in Medway. EK360
- “It’s my five minutes away from anything. It sounds horrible but it’s me time – mental health break – an excuse to have a break from children [and] be in a quiet place.” (Page 32) Smoking Insights - Eastern European Communities in Medway. EK360

Drug and Alcohol

- “There were a few deaths in my family… and then as I got older, a few more happened, and then I turned to drink heavily - and then drugs – I couldn’t handle it, to be honest with you – and the domestic violence as well.” (Page 4) Listening to the voices of people who live with the challenges of addiction and who are - or have - experienced being homeless. M&S HaCP
- ‘Another person described the effects of drugs as a form of tranquiliser. “It medicates you, so it takes away the anxiety and pain.” Similarly, another person described how drugs

helped cope with his hurt and anger due to feeling rejected by his dad in his early years, saying, "When I took it, all the anger, all the bitterness disappeared – completely utterly - I didn't care anymore – I'm not going to let these people affect me anymore."' (Page 5) Listening to the voices of people who live with the challenges of addiction and who are - or have - experienced being homeless. M&S HaCP

- "Internally, you're trying to block it out; hence, you're using drugs – but eventually, they inevitably become the problem – affecting your outside life." / "…My addiction, yeah, I hate it – I hate myself." (Page 5) Listening to the voices of people who live with the challenges of addiction and who are - or have - experienced being homeless. M&S HaCP
- 'There were some culturally specific health concerns that were raised. Significantly, the use of alcohol and drugs amongst the male members of the community and the secondary impact of these on relationships, the family unit and emotional health.' (Page 2). Community Health Catalyst Programme – Listening Event Report
- "In our culture, people drink alcohol on every occasion. It easily gets the better of you. Too many men are alcoholics and turn to drink to manage their emotions." (Page 2) Community Health Catalyst Programme – Listening Event Report
- "Cocaine use is very prevalent in our community. Young people see it as the norm, and it's encouraged by older cousins. This usually results in the breakdown of families and causes the children distress." / "My husband took drugs and hid them from us, this wasted all our money and made us all unhappy." (Page 2) Community Health Catalyst Programme – Listening Event Report
- 'The weighted survey results estimate that 9.3% of Medway adults consume 15 or more units of alcohol a week. Certain groups in Medway are more likely to have higher levels of alcohol consumption. These groups include: Adults in wards All Saints and Cuxton, Halling & Riverside. males, adults aged 55 to 64 years old.' (Page 84) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health
- 'All Saints as highest proportion of alcohol consumed by ward - 15 or more units per week.' (Page 13) Medway Health and Wellbeing Survey - Alcohol Analysis. Medway Public Health
- 'Males estimated to be the higher proportion of adults consuming 15 of more units of alcohol a week by inequalities.' (Page 15) Medway Health and Wellbeing Survey - Alcohol Analysis. Medway Public Health
- 'Ages 55-64 estimated to be the higher proportion of adults consuming 15 of more units of alcohol a week by inequalities.' (Page 15) Medway Health and Wellbeing Survey- Alcohol Analysis. Medway Public Health
- 'Unemployed estimated to be the higher proportion of adults consuming 15 of more units of alcohol a week by wider determinants.' (Page 16) Medway Health and Wellbeing Survey- Alcohol Analysis. Medway Public Health
- 'The top six wards which have the highest admission episodes for alcohol specific conditions are: Chatham Central and Brompton, Gillingham South, Luton, Gillingham North, Fort Pitt, Strood Rural.' (Page 11) Public Health Cumulative Impact Assessment. Medway Public Health
- 'There are also several off licences, all of which are small convenience stores, corner shops and newsagents. Many of these sell products which are termed as 'super strength' beer and cider, i.e. cheap beer and cider products over 5.5% ABV, making cheap, high-strength alcohol readily available.' (Page 14) Public Health Cumulative Impact Assessment. Medway Public Health
- 'In 2014 Medway Public Health commissioned a study into alcohol use in Medway. The result - Medway Alcohol: Insight (2014). It identified there was a clear link between alcohol related harms, hospital admissions, alcohol related crimes and deprived areas where there is a density of licensed premises.' (Page 19) Public Health Cumulative Impact Assessment. Medway Public Health

- “I am a support worker; I work with people with substance misuse issues and alcoholism. We are finding it harder to speak with our customers at any time of the day as alcohol is always available… one of our customers will walk 5 miles in the early hours to a garage where he will be served alcohol even though he is a well known alcoholic. We feel there should be some time restrictions in place like there are on Sunday.” (Page 65) Public Health Cumulative Impact Assessment. Medway Public Health
- “I used to be an alcoholic which I genuinely believe was made worse by the ease of access in more densely populated areas of Medway. This not only now causes a lot of antisocial behaviour but also causes a lot of daytime drinking.” (Page 124) Public Health Cumulative Impact Assessment. Medway Public Health

Vaccination

- ‘The weighted survey results estimate that 88.9% of Medway adults are fully vaccinated and 11.1% are not fully vaccinated. 92 out of 3,594 survey respondents did not answer this question.’ (Page 66) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health
- ‘Certain groups in Medway are less likely to have been fully vaccinated against COVID-19. These groups include: Adults in Medway Central PCN and Strood PCN, adults in wards Luton, Strood West, Twydall, and Gillingham South, adults aged 18 to 34 years old, adults from minority ethnic backgrounds, adults living in areas of high deprivation (quintile 1), unemployed adults, adults who rent (with or without housing benefit).’ (Page 71) Medway Health and Wellbeing Survey - All Analysis. Medway Public Health

Gap analysis for Principle 6

From the engagement detailed within the submissions received, the following elements of strengthening the role and impact of ill-health prevention, have not been covered or are limited within submissions received. This might include hearing what people say about:

- Feedback around causes of health-related problems
- Feedback about how people have empowered themselves to take action to improve health and wellbeing for themselves and others
- Feedback about programmes which promote healthy behaviours and lifestyles including mental wellbeing, diet, exercise, smoking and drugs and alcohol
- Feedback around suicide and suicide prevention initiatives
- Feedback around domestic abuse, impacts, interventions, from 'whole family' perspective including victims, children and young people and perpetrators
- Experience of free NHS health checks for adults aged 40-74
- Experience of mental health awareness in schools and workplaces

From the engagement detailed within the submissions received, the following cohorts are represented within this issue mapping under Principle 6. However, it is not possible to state how representative this is of the wider population.

- People who are D(d)eaf
- Young people and carers of those with SEND
- People who are homeless
- Older Adults
- Working age adults
- Sikh community
- People with Diabetes
- People with hypertension
- People who smoke

From the engagement detailed within the submissions received, the following cohorts don't appear to be represented within this issue mapping under Principle 6:

- People who are accessing healthy behaviour support programmes
- People with physical disabilities
- People with learning difficulties
- People who have been affected by suicide
- People who have been affected by domestic abuse
- People who have accessed, or not been able to access NHS health checks
- Employers, with regards to physical and mental health awareness schemes
- Schools, colleges and Universities with regards to physical and mental health awareness schemes

PRINCIPLE 7

Tackle racism, discrimination, and their outcomes: Address the social injustices that contribute to health disparities.

To enable the reader to build context to the insights explored within this chapter, the reader is advised to consider the following:

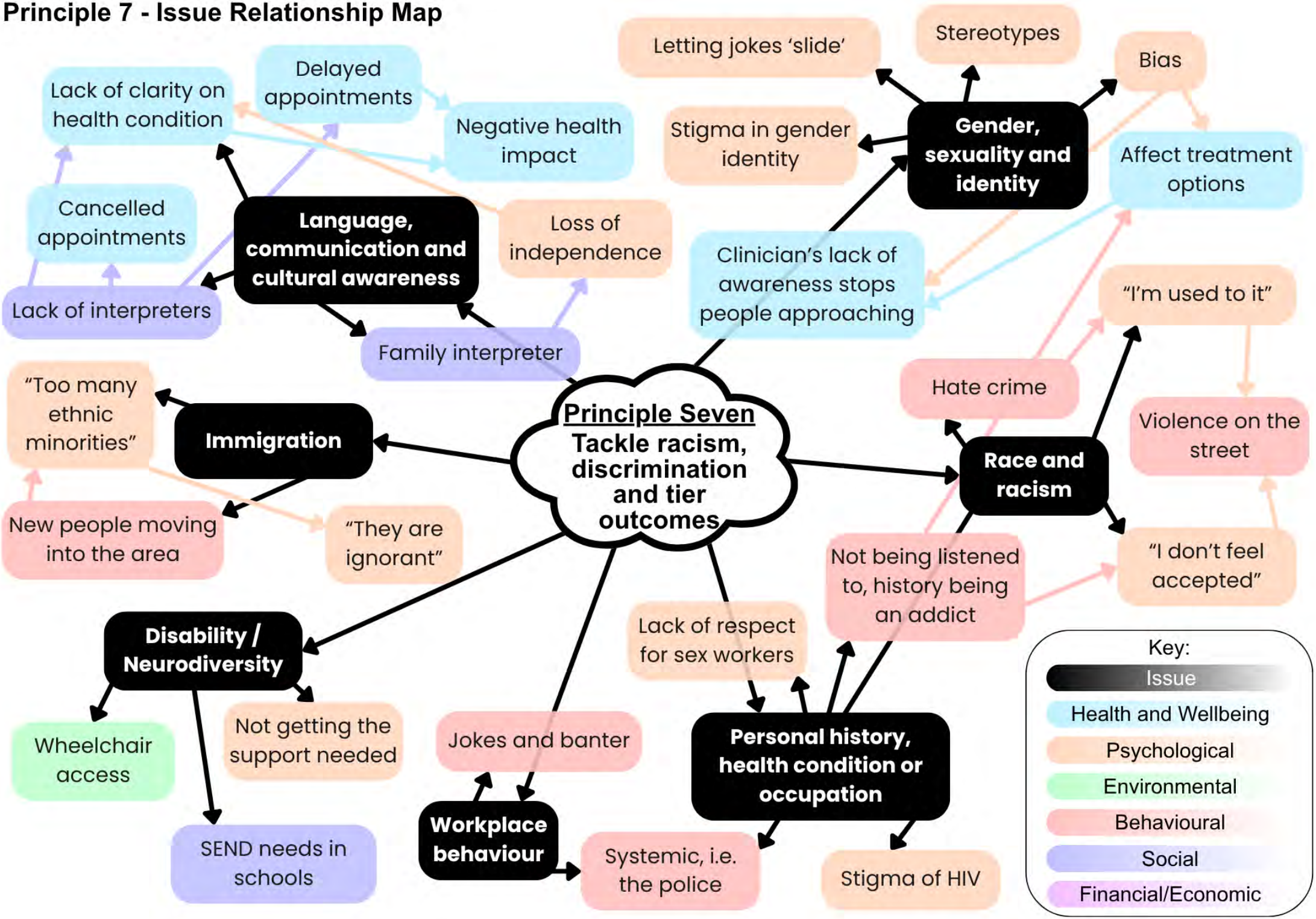
- Source of submissions that have provided insights under this Marmot principle
- Engagement methodologies used to generate insights
- That issues raised are not quantified in terms of how many people are affected

Engagement and insight gathering methodologies

Insights that related to this principle were drawn from submissions that used the following methodologies:

Number of times cited	Insights gathering methodology
8	Digital, online survey
13	Public engagement feedback
16	Community Visit
11	Focus group feedback
6	High Street Engagement
4	Workshop
3	Consultation
1	Case studies
1	Conference
1	National data sets, with potential for some randomised controlled trials or non-randomised studies

Principle 7 - Issue Relationship Map



Issues raised within the Insights

Discrimination based on language, communication and cultural awareness

- ‘People talked to us about appointments being cancelled due to the lack of an interpreter. Or examples when interpreters couldn’t stay for the duration of the session.’ (Page 3) Focus on the Deaf Community in Medway April 2020. Healthwatch Medway
- “Deaf people tend to go to appointments with someone as there is no faith that there will be an interpreter - even though one was requested.” (Page 4) Focus on the Deaf Community in Medway April 2020. Healthwatch Medway
- “People were told it would be a two week wait to organise an interpreter which caused great concern if they needed to see the GP for something urgent.” (Page 3) Focus on the Deaf Community in Medway April 2020. Healthwatch Medway
- ‘Lack of clinician knowledge on impact of cultural differences on health. Support in other languages is limited, and there is a general lack of interpreters.’ (Page 3) Medway and Swale Health and Care Partnership – Engagement inequalities report. M&S HaCP
- Language barrier: ‘Difficult to communicate and make friends. Difficult to make appointments as can’t understand or be understood. Difficult to attend language classes due to work commitments. English lessons not ability specific makes learning slow.’ (Page 1 Local Asset and Signposting Plan - Medway Help the Ukrainians. Community Health Catalyst Programme
- ‘A lack of accessible interpreters means it is difficult to make appointments over the phone and to understand / be understood at appointments.’ (Page 1) Vulnerable Migrants- Community Health Catalyst Programme – Listening Event Report. Community Health Catalyst Programme

Discrimination based on gender, sexuality and identity

- ‘Clinician lack of awareness of gender identify is present and prevents people from accessing treatment. Clinical bias can often affect treatment, particularly in relation to gender.’ (Page 3) Medway and Swale Health and Care Partnership – Engagement inequalities report. M&S HaCP
- ‘Discrimination towards the LGBTQIA+ community was highly prevalent.’ (Page 1) Medway Pride Event – Community Health Catalyst Programme – LGBTQIA+ Group. Community Health Catalyst Programme
- ‘Being stereotyped and sexual orientation being a stigma.’ (Page 1) Medway Pride Event – Community Health Catalyst Programme – LGBTQIA+ Group. Community Health Catalyst Programme
- ‘Everyone agreed that many teachers let things slide, such as smiling whilst reprimanding someone telling a ‘gay’ joke, as if they found it funny.’ Be You Project (Chatham Group) Listening Event Report. Community Health Catalyst Programme
- ‘Higher risk groups include young people who are: from minoritized ethnic communities including refugees and asylum-seekers, and who are LGBTQ+.’ (Page 7) Comprehensive Mental Health Support for 18-25s- Kent and Medway Review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin
- ‘The issue of cultural barriers was raised and the persistence of racial discrimination and prejudice. It was felt this is more directed at the older generation who observe the cultural traditions more formally.’ (Page 3)
  It was clear that there was a significant variation in the knowledge of health professionals and also the way they treat young people who identify as LGBTQIA+. Be You Project (Chatham Group) Listening Event Report Community Health Catalyst Programme
- ‘Not taken seriously even if you get appointment. Certain demographics not taken serious by health professionals.’ (Page 3) Medway Pride Event – Community Health Catalyst Programme – LGBTQIA+ Group . Community Health Catalyst Programme

- LGBTQ+- Medway / Swale Pride: '9/34 people felt their health was not taken seriously because of misconceptions around LGBTQ+.' (Page 6) Communications and Engagement Group- Activity report. M&S HaCP

Discrimination based on race / racism

- '4% mentioned racial issues. "There is a little bit of racism, but I have come down from London, so I am used to that."' (Page 5) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway
- '13% mentioned the negative impact of the community. "There are a lot of new people moving into the area. I don't want to be racist but, you know what I mean?"' (Page 5) How people feel about living in Medway- A spotlight report focusing on Lordswood and Walderslade. Healthwatch Medway
- '9% spoke about the development of new housing in the area being a negative. "So many new houses going up and the people moving in are all very ignorant. Some people really are not nice. Too many different ethnicities."' (Page 6) How people feel about living in Medway- A spotlight report focusing on Hempstead, Wigmore and Parkwood. Healthwatch Medway
- "Socially I don't feel accepted. I wear a turban and have a beard, so people treat me differently". "My parents' face racism, and what they say to my parents really hurts me. They had it growing up, but it still happens." (Page 3) Medway and Swale Health and Care Partnership – Engagement inequalities report. M&S HaCP
- The Gypsy, Traveller, Roma community is considered to be an ethnic minority and has experienced a significant amount of racism from the general public, businesses and statutory bodies such as the Police. They said that 'people are allowed to be racist towards us, but racism towards other minority groups is not allowed'. There were numerous examples given during the course of the conversation, some more recent than others If anyone is racist to another culture, they can get arrested for it, but we can have people do it in public, do it in front of police, put it across the internet, and are allowed to be racists towards us, and not accept us. Why are they allowed to do that to us? Because we have no one to speak up for us!' Gypsy, Roma, Traveller Listening Event Report. Community Health Catalyst Programme
- "I have experienced some racial incidents. That's nothing new. I am used to it by now. You just crack on." (Page 22) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway
- Safety was a priority amongst many of the people that we spoke to, they have experienced violence towards them whilst on the streets due to the way they look. (Page 1 Homelessness Listening Event Report. Community Health Catalyst Programme
- 'Hate crime is prevalent in the community, people do not feel able to be themselves in society.' (Page 3) Medway and Swale Health and Care Partnership – Engagement inequalities report. M&S HaCP
- 'There are many clever people amongst the Gypsy community, and they would go a long way, but they aren't given the chance, they (the system) won't give the children the chance.' (Page 3) Medway and Swale Health and Care Partnership – Engagement inequalities report. M&S HaCP

Discrimination based on personal history, health condition or occupation

- "A friend of mine, who had struggled with addiction [and] is now in recovery and working, went to their GP many times… Both they and I feel they weren't listened to because of their history as an addict." (Page 11) The Experience of Mental Health Services from those with Drug and Alcohol issues. Healthwatch
- 'Stigma within general health care for people living with HIV.' (Page 3) Medway Pride Event LGBTQIA+ Group. Community Health Catalyst Programme
- Homelessness and sex workers- 'The group discussed experiencing discrimination and a lack of respect by healthcare staff (specifically in hospital settings) and how important a compassionate approach is when providing care. One participant explained: "A lot of them up

there, it's just a job. They don't care. People like me, they look at me and judge me. But we're not all the same… there to nick some one's bag from the next locker. Understand? We're not all the same but you're judged by that. And the security up there is disgusting mate. They call you crackhead and all that."' (Page 21) Medway Local Joint Health and Wellbeing Strategy (JLHWS) - Qualitative Findings and Recommendations from Survey and Focus Group Engagement. Health and Wellbeing Board

Public views on immigration

- 4% mentioned immigration. "I don't like Chatham High Street, the last couple of years there are all the foreigners, they are not very clean, horrible. It's a shithole. The crackheads and foreigners. It's too overpopulated." (Page 7) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- "We have too many immigrants. It's not been too bad recently, but you get groups of them hanging around, it feels threatening." (Page 7) How people feel about living in Medway - A spotlight report focusing on Strood. Healthwatch Medway

Discrimination based on disability and neurodiversity

- Neurodiversity- 'Parents and carers relayed a concern that young people with autism were being discriminated against as there was a lack of professional knowledge and understanding and young people were not getting the help they needed.' (Page 23) Comprehensive Mental Health Support for 18-25s- Kent and Medway review 2021. Dr Amanda Carr, Matthew Scott and Daisy Elvin
- Negative feedback from both the focus groups and surveys often related to schools not meeting the needs of the CYP, schools being authoritarian or punitive in nature, CYP experiencing bullying, and having to rely on schools as the gatekeepers to further support Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity
- 'Schools do not understand and cater appropriately to the needs of CYP with SEND.' (Page 70) Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity
- "I also think better communication on things like drop kerbs and mobility access in the towns." Disability- 6% of people mentioned accessibility as a barrier to getting involved. "There's a lot of places I can't get into with my wheelchair." Steady Steps Towards a Solid Future - A report on Medway Resident's Perceptions of Frailty, Frailty Assessments and the Falls Prevention Service. Healthwatch Medway
- Access to appropriate support for both physical and mental health was an issue and 'lack of knowledge' is cited as an underlying cause of (often unintentional) discrimination. (Page 1) Be You Project (Chatham Group) Listening Event Report. Community Health Catalyst Programme

Workplace behaviour

- "Working in a male-dominated environment as an engineer, there is a certain amount of what I have come to know as toxic atmospheres. A level of prejudice and racism in where I have worked, with people I have known. There's a joke for everyone – the ugly bloke, the ginger bloke. Being the fat bloke makes me the butt of those the jokes, but I shrug them off most of the time. Sometimes, they hurt. It's not right, but you change what you can." (Page 22) Living with obesity - A community health research project to explore the practicalities for people living with obesity. Medway Voluntary Action

Gap analysis for Principle 7

From the engagement detailed within the submissions received, the following elements of strengthening the role and impact of ill-health prevention, have not been covered or are limited within submissions received:

- Feedback from specific protected characteristic groups
- Maternal health outcomes for ethnic minority groups of women
- Feedback about pupils and adults' opportunities for physical and cultural activities and building cultural capital
- Feedback around refugees, newly arrived communities and Asylum seekers
- Feedback around accessible toilets, changing places
- Feedback around hate crime reporting
- Feedback around the SEND Local Offer
- Feedback around sports / leisure access for people with disabilities
- Feedback around direct racial discrimination / intimidation within communities

From the engagement detailed within the submissions received, the following cohorts are represented within this issue mapping under principle 7. However, it is not possible to state how representative this is of the wider population:

- Migrant communities
- People of Black and Asian ethnic heritage
- Neurodiverse young people
- Disabled young people and adults
- People identifying as LGBTQIA+
- People who are homeless
- People who are Deaf
- Gypsy, Roma and Traveller community
- People living with HIV
- Sex workers
- People with substance misuse. addiction

From the engagement detailed within the submissions received, the following cohorts don't appear to be represented within this issue mapping under Principle 7:

- Refugees
- Asylum seekers
- Pregnant women of Black and Asian heritage

PRINCIPLE 8

Pursue environmental sustainability and health equity together: Recognise the interconnection between environmental health and social equity.

To enable the reader to build context to the insights explored within this chapter, the reader is advised to consider the following:

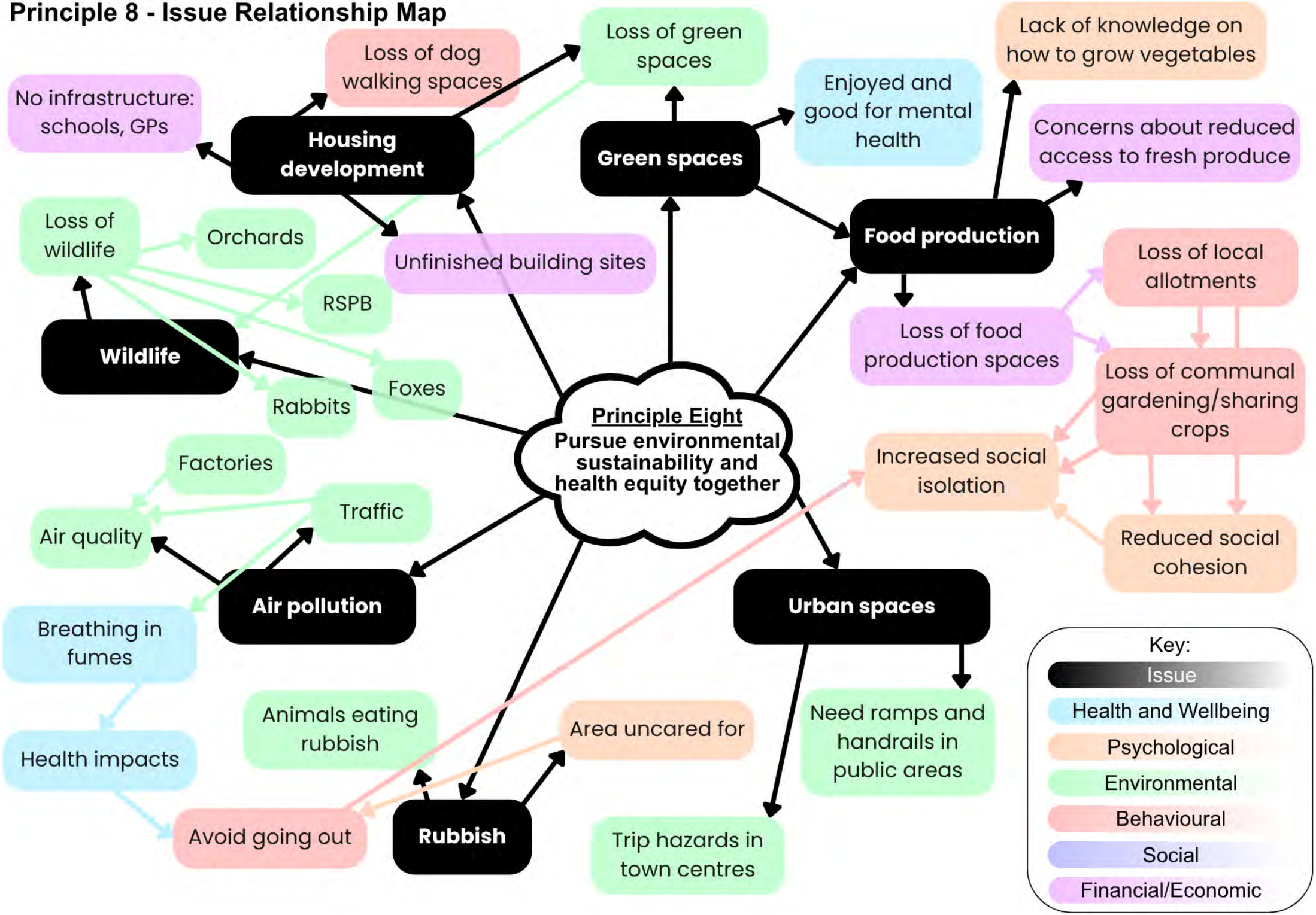
- Source of submissions that have provided insights under this Marmot principle
- Engagement methodologies used to generate insights
- That issues raised are not quantified in terms of how many people are affected

Engagement and insight gathering methodologies

Insights that related to this principle were drawn from submissions that used the following methodologies:

Number of times cited	Insights gathering methodology
9	Public engagement feedback
9	Community visit
1	Focus group feedback
5	High street engagement
1	Workshop

Principle 8 - Issue Relationship Map



Issues raised within the Insights

Air pollution

- '3% mentioned air pollution "The pollution and the traffic congestion."' (Page 7) How people feel about living in Medway - A spotlight report focusing on Rainham and Twydall. Healthwatch Medway
- We should be- 'able to breathe clean air and not be surrounded by pollution.' (Page 30) Improving Services for Chronic Obstructive Pulmonary disease (COPD) across Medway and Swale. Medway Voluntary Action
- "Improve air quality." "I would like to see some positive changes in the environment – stop it looking so rundown, I mean we have a random tree growing out of the shop over there. Smarten it up, have a cash injection, so people take a bit of pride in where they live." (Page 18) How people feel about living in Medway- A spotlight report focusing on the Medway town of Gillingham. Healthwatch Medway
- "Simple things such as temperature and air quality can trigger a health crisis in seconds. Air quality affects it, some days you're fine you go outside, and it hits you and you can only walk a few steps." (Page 1) Multi-morbidities report Listening Event Report. Community health catalysts, Medway and Swale health and care partnership, Medway voluntary action, Swale community and voluntary services
- "There is a lot of traffic, so it'd be good if there was less traffic around cause I worry about breathing in the fumes from the vehicles." (Page 19) A spotlight report on the Building Blocks of Life, focusing on the locality of Rochester. Healthwatch Medway
- "They sit with their engines running and it's just polluting the air of the lovely green area it can make you think about moving, like whether to stay in the area or not." (Page 12) How people feel about living in Medway- A spotlight report on the Medway Villages Halling and Cuxton. Healthwatch Medway
- "Our area is very overpopulated, there is so much traffic, very few greenspaces. Concrete factories that let out a lot of dust, used to be a stell mill that left red dust on everything, there are very few things to do in the area and poor paid jobs." (Page 26) Improving Services for Chronic Obstructive Pulmonary disease (COPD) across Medway and Swale. Medway Voluntary Action

Development (see also Principle 5)

- "The roadworks are appalling and there's too many houses going up. They're taking all of the green spaces away and the dog walking areas. They've taken all of the orchard away." (Page 9) A Spotlight Report How people feel about living in Medway A spotlight report focusing on the peninsula villages of Allhallows, Cliffe, Cliffe Woods, High Halstow, Isle of Grain and Stoke. Healthwatch Medway
- '9% spoke about the development of new housing in the area being a negative. "They're building more houses and there's no infrastructure."' (Page 6) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- "I do worry about the changes that are being made, they're building 30 houses and we have to worry about the infrastructure." How people feel about living in Medway - A spotlight report focusing on the peninsula villages of Allhallows, Cliffe, Cliffe Woods, High Halstow, Isle of Grain and Stoke. Healthwatch Medway
- "Neither of us wanted to live in a town so why would we have wanted where we live now to be changed into a town? We are against all the building. Balance between industry, wildlife and people. It's all marshlands here."' (Page 9) A Spotlight Report How people feel about living in Medway A spotlight report focusing on the peninsula villages of Allhallows, Cliffe, Cliffe Woods, High Halstow, Isle of Grain and Stoke. Healthwatch Medway
- "There is a lot of building work going on and more people are moving into the area, which is good and bad." "Four Elms is a busy area and needs better infrastructure. There's too much housing being proposed to be built, which means we are going to be losing all our fields. I understand that people have to live somewhere, but they shouldn't be building on all the

green fields."' (Page 9) A Spotlight Report- How people feel about living in Medway focusing on the peninsula villages of Chattenden, Hoo, Upnor and Wainscott. Healthwatch Medway

- 6% spoke about the development of new housing in the area being negative. 'There is a lot of building work going on, a lot of regeneration, it's a bit top heavy at the moment but no infrastructure to support it, no GPs, no extra schools.' How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- "My village has been destroyed by all the new houses. We are currently standing in what used to be an orchard, it was all fields." (Page 16) A spotlight report - What did people tell us about housing and homelessness? Mental Health Voice
- "Our housing development has just been left unfinished and the work on it seems to be never ending." (Page 19) A spotlight report on the Building Blocks of Life, focusing on the locality of Rochester. Healthwatch Medway

Green spaces

- '11% mentioned the availability of local green spaces to be a positive feature of the area. "It's got nice open spaces with the nature reserve. You can go for long walks in the countryside. It's nice and quiet if they don't build any more houses."' (Page 4) How people feel about living in Medway - a spotlight report focusing on Chatham. Healthwatch Medway
- 11% mention the availability of local green spaces are a factor in their levels of happiness about the are they live. 'We are by some greenbelt land – I have a nice, uninterrupted view of the countryside from my doorstep. It does my mental health the world of good. I feel lucky to live with this on my doorstep'. (Page 4) How people feel about living in Medway - A spotlight report focusing on Strood. Healthwatch Medway
- 43% of respondents mentioned that they enjoy the green spaces around the peninsula. "The surrounding woods are lovely to walk in." (Page 5) A Spotlight Report- How people feel about living in Medway focusing on the peninsula villages of Chattenden, Hoo, Upnor and Wainscott. Healthwatch Medway
- 12% mentioned the availability of local green spaces to be a positive feature of the area. "There are nice walks for our dog, but they might disappear."' (Page 4) How people feel about living in Medway- A spotlight report focusing on Hempstead, Wigmore and Parkwood. Healthwatch Medway

Urban spaces

- A cluster of comments focused on environmental factors (11 comments). This included 'handrails ramps and adaptions in public spaces as well as homes' (6%, 6 comments), and 'Pavements and trip hazards being addressed in public spaces' (3%, 3 comments). "Have more handrails for going upstairs I want to see awareness raised around trip hazards. I want to see the council coming out looking for hazards, things like fly posting where cable ties are sticking out at eye height, there are trip hazards everywhere that they need to come and fix."' (Page 23) Steady Steps Towards a Solid Future - A report on Medway Resident's Perceptions of Frailty, Frailty Assessments and the Falls Prevention Service. Healthwatch Medway

Food production

- 'Major health concerns relating to food (additions of hormones and other additives, insecticides). Medical consequences of eating poorly and impacts on environment.' (Page 12) Food & Nature Futures in Medway (Community Workshop Results). University of Greenwich
- Community allotments exist; more allotments are being used. (Page 5)
- 'There is a lack of grow your own spaces and education, community allotment waiting lists are years long.' (Page 6) Let's talk about food and nature in Medway - highlights from survey responses. University of Greenwich
- Growing healthy food and sharing it amongst communities (Page 5) Listening Event Report. Community Health Catalyst Programme

- Community growing gardens foster connections, but can also provide opportunities for learning about growing, cooking and consuming produce (Page 21) Let's talk about food and nature in Medway- highlights from survey responses. University of Greenwich
- Community garden sharing crops helping each other, communities growing own food, using everything that is grown, more market garden / rooftop gardens. Bring back knowledge of plants and conscious foraging 'go back to indigenous roots', understand where food comes from and strengthen human- nature connectedness. (Page 18) Food & Nature Futures in Medway (Community Workshop Results). University of Greenwich

Rubbish (see also Principle 5)

- "Environmental issues such as consistent rubbish left on paths and no action being taken to curb this; we never had any rubbish on paths years ago." (Page 6) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway
- "There's rubbish everywhere and people just don't care about their environment." (Page 7) Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway. Healthwatch Medway
- 'Too much food put out in black bags which are attacked by gulls, cats and foxes, litter issues.' Let's talk about food and nature in Medway- highlights from survey responses. University of Greenwich

Wildlife

- Destruction of wildlife: "They have gotten rid of a lot of the wildlife there, like the foxes and the rabbits." (Page 7) How people feel about living in Medway - A spotlight report focusing on Strood. Healthwatch Medway
- "It's quiet and you have the RSPB bits. The nature is lovely. The marshes in Cliffe are beautiful. If you haven't been there you haven't lived. It's an RSPB area for all the birds and you can see the sheep in the fields. The community feel, the quietness the nature and stuff. Things like outdoors areas and the woods, it's great to have a rural aspect to Medway." (Page 3) How people feel about living in Medway - A spotlight report focusing on the peninsula villages of Allhallows, Cliffe, Cliffe Woods, High Halstow, Isle of Grain and Stoke. Healthwatch Medway
- "It's lovely, quiet, moved back here from Gravesend, no traffic sounds, just woodland sounds." (Page 4) How people feel about living in Medway - A spotlight report focusing on the peninsula villages of Allhallows, Cliffe, Cliffe Woods, High Halstow, Isle of Grain and Stoke. Healthwatch Medway
- 'Participants identifying with other ethnic groups most commonly selected 'tackling environmental issues' as being something that could improve their health and wellbeing.' (Page 38) Joint Local Health and Wellbeing Strategy Children and Young People Survey Analysis. Medway Public Health
- '1 in 3 young adults (aged 16–25) are worried about the environment and the future of the planet.' (Page 9) Child-Friendly Medway Annual Report. Medway Council

Gap analysis for Principle 8

From the engagement detailed within the submissions received, the following elements of creating fair and good work for all, have not been covered or are limited within submissions received:

- Transport systems that promote active travel and road safety
- Retrofitting of homes to be energy efficient, climate resilient and healthy
- Feedback around sustainable open spaces, (as opposed to loosing open spaces for development)

From the engagement detailed within the submissions received, the following cohorts are represented within this issue mapping under Principle 8. However, it is not possible to state how representative this is of the wider population.

- Residents from across Medway
- People living with COPD and lung conditions
- Young people from Medway
- People with co-morbidities

From the engagement detailed within the submissions received, the following cohorts don't appear to be represented within this issue mapping under Principle 8:

- People living in private rented accommodation
- People living in privately owned accommodation
- Commuters who use public transport
- School children using public transport

Appendix 1

PRINCIPLE 1
Give every child the best start in life: Focus on reducing inequalities in early development and ensuring that all children have access to quality education and support.
Define children as under 16 yrs of age
Define Infants as under 1 year of age

This might include hearing what people say about:

- Inequalities in the early development of physical and emotional health, and cognitive, linguistic and social skills
- Access to high quality maternity services, parenting programmes, childcare and early years education
- The resilience and wellbeing of young children
- Experiences around infant deaths
- Experiences of children in low-income families
- Experience of families on Universal Credit
- Experience of families with disabled children / possibly on disabled child benefits
- Experiences of child carers
- language development, including children with EAL (English as an Additional Language)
- Experience of home-visiting programmes or Family Hubs
- Experience of universal child health checks and immunisation programmes
- Experience of parenting support groups and mental health services for new parents
- Experience of nutrition programmes for pregnant women and young children
- Experience of pre-natal care
- Experience of breastfeeding support through community health workers

PRINCIPLE 2
Enable all children, young people and adults to maximise their capabilities and have control over their lives: Reducing inequalities in the early development of physical and emotional health, cognitive, linguistic, and social skills.
This might include hearing what people say about:

- Resilience and well-being of young children
- Experiences of school for children and young people
- Experience of lifelong learning for adults to maximise their capabilities and have control over their lives
- Experiences of schools, families and communities work in partnership to reduce the gradient in health, wellbeing and resilience of children
- Experience of children and young people enrichment activities and experiences with their peers
- Experience of children's home and road safety
- Children's experiences around mental health and wellbeing
- Feedback about free school meals and non-free school meals
- Experiences / feedback around apprenticeships
- Experience feedback around young people not in employment, education or training (NEET)
- Experiences feedback around pupil absences
- Children in care outcomes
- Experience of mentoring schemes for young people
- Experience of digital literacy programmes in libraries and community centres

PRINCIPLE 3

Create fair employment and good work for all: Ensure that everyone has access to decent work and fair employment conditions.

This might include hearing what people say about:

- Feedback around the relationship between employment or lack of it to physical and mental health
- Insights around pay (local wage gap between men and women, impact of low pay or cost of living crisis on health outcomes)
- Barriers to and support for long-term unemployment
- People who are disadvantaged in the labour market to attain the skills and training they need to secure and maintain good quality employment
- Healthy workplaces that promote employee's health and wellbeing
- Access to volunteering, training
- Feeback around quality of jobs
- Feedback around stability / longevity of jobs
- Experience of flexible working arrangements for carers and parents
- Job placement services for long-term unemployed

PRINCIPLE 4

Ensure a healthy standard of living for all: Address economic inequalities to provide everyone with a healthy standard of living.

This might include hearing what people say about:

- Experience of fuel poverty or food insecurity
- Feedback around income levels for healthy living for people of all ages
- Experience of changes in income around moves to and from benefits and employment / training
- Experience around interactions between low income and health, ie mental health, suicide, disability-related living costs and challenges
- Feedback around personal health budgets / PA employment etc
- Digital accessibility / digital barriers, digital poverty
- Types of digital interventions people are accessing / not accessing
- Experience of interventions to reduce long-term unemployment
- Experience of food banks, home cooking, meal preparations
- Feedback around the energy efficiency of housing, 'heating or eating'
- Homelessness rough sleeping sofa surfing
- Housing, overcrowding
- Barriers to rental / issues with rental properties
- Heating / eating
- Feedback around co-morbidities, homeless / substance misuse / mental health
- Barriers to affordable housing initiatives and rent controls
- Experience of access to affordable childcare services
- Experience of minimum income guarantees or basic income pilots

PRINCIPLE 5

Create and develop healthy and sustainable places and communities: Foster environments that promote health and well-being.

This might include hearing what people say about:

- Feedback around climate change, access to fresh air and open spaces, and safe play areas
- Feedback around social isolation, connectivity with community, definition of community
- Feedback around transport / travel linkages between communities / rural / urban

- Feedback around potholes
- Feedback around housing developments in areas and loss of open spaces
- Feedback around detection or conditions
- Feedback around access to community-based health prevention initiatives
- Feedback around obesity
- Feedback around long-term conditions, diabetes, CVD, asthma
- Feedback around physical activity
- Feedback around community safety / crime
- Feedback around quality of housing
- Feedback about exposure to air / traffic pollutants
- Feedback around access to healthy diets fresh food – food growing opportunities and cookery skills
- Feedback around community assets and strengths

PRINCIPLE 6

Strengthen the role and impact of ill-health prevention: Focus on preventive measures to reduce the incidence of illness and promote overall health.

This might include hearing what people say about:

- Feedback around causes of health-related problems
- Feedback about how people have empowered themselves to take action to improve health and wellbeing for themselves and others
- Feedback about programmes which promote healthy behaviours and lifestyles including mental well-being, diet, exercise, smoking and drugs and alcohol
- Feedback around suicide and suicide prevention initiatives
- Feedback around Domestic abuse, impacts, interventions, from 'whole family' perspective including victims, children and young people and perpetrators
- Feedback around drug and alcohol
- Feedback around adult mental health
- Experience of free NHS health checks for adults aged 40-74
- Experience of mental health awareness in schools and workplaces

PRINCIPLE 7

Tackle racism, discrimination, and their outcomes: Address the social injustices that contribute to health disparities.

This might include hearing what people say about:

- Feedback from specific protected characteristic groups
- Maternal health outcomes for ethnic minority groups of women
- Feedback about pupils and adults' opportunities for physical and cultural activities and building cultural capital
- Feedback around refugees, newly arrived communities and asylum seekers
- Feedback around accessible toilets, changing places
- Feedback around hate crime reporting
- Feedback around the SEND Local Offer
- Feedback around sports / leisure access for people with disabilities
- Feedback around direct racial discrimination / intimidation within communities

PRINCIPLE 8

Pursue environmental sustainability and health equity together: Recognise the interconnection between environmental health and social equity.

This might include hearing what people say about:

- Transport systems that promote active travel and road safety
- Retrofitting of homes to be energy efficient, climate resilient and healthy
- Feedback around sustainable open spaces, (as opposed to losing open spaces for development)

Appendix 2

SUBMISSIONS' AUTHORS

Active Kent and Medway
- Club & Community Forum Roadshow Tackling Inequalities: Increasing Participation (November 2024)

Diabetes UK
- N*orth Central London and Medway and Swale Focus Groups Insights*

Dr Amanda Carr
- Kent and Medway Young Adult Mental Health Rapid Needs *Assessment (January 2025)*

Dr Amanda Carr, Matthew Scott and Daisy Elvin
- Comprehensive Mental Health Support for 18-25s – Kent and Medway review 2021 (includes ANNEX A [18-25s Comprehensive Offer / Transitions – Literature review]) (2021)

Dr Warren Hickson
- Listening to the voices of people who live with cardiovascular disease (CVD) – informing the co-design of a system-wide CVD approach based across Medway and *Swale (2024)*
- Listening to the voices of people who live with the challenges of addiction and who are - or have - experienced being *homeless (2024)*
- Supporting young parents and their children to overcome *adversity (2024)*

EK360
- Empowering Communities to Address Hypertension in Medway (October 2022)
- Smoking Insights – Eastern European Communities in Medway (February 2025)
- Smoking Insights – Residents in Medway with Mental Health Conditions (February 2025)

Health and Wellbeing Board
- Medway Local Joint Health and Wellbeing Strategy (JLHWS) – Qualitative Findings and Recommendations from Survey and Focus Group Engagement

Healthwatch Kent
- Young People's LGBT+ BeYou's BeProud Big Day Out (January 2024)

Healthwatch Medway
- Focus on the Deaf Community in Medway (April 2020)
- Focus on Dentists (February 2022)
- Listening to Feedback about the Wellbeing Navigation Service in Medway (June 2022)
- Listening to Feedback about the Reablement service in Medway (July 2022)
- Mental Health Assessment & Counselling Service (MACS) Feedback on Proposed Facilities (September 2022)
- A Spotlight Report – On the Deaf Community in Medway (April 2024)
- Perceptions of Frailty, Frailty Assessments and the Falls Prevention Service (January 2025)
- Public Perceptions of Crime, Anti-Social Behaviour and Personal Safety in Medway (September 2025)
- Steady Steps Towards a Solid Future – A Report on Medway Residents'
- Waking up to Sleep – Exploring How Medway Sleeps (November 2025)
- A Spotlight Report – How people feel about living in Medway focusing on the peninsula villages of Allhallows, Cliffe, Cliffe Woods, High Halstow, Isle of Grain and Stoke (January 2024)

- A Spotlight Report – How people feel about living in Medway focusing on the peninsula villages of Chattenden, Hoo, Upnor and Wainscott (February 2024)
- A Spotlight Report – How people feel about living in Medway focusing on the Medway town of Gillingham (March 2024)
- A Spotlight Report – How people feel about living in Medway focusing on Halling and Cuxton (April 2024)
- A Spotlight Report – How people feel about living in Medway focusing on Rochester (May 2024)
- A Spotlight Report – How people feel about living in Medway focusing on Strood (June 2024)
- A Spotlight Report – How people feel about living in Medway focusing on Lordswood and Walderslade (July 2024)
- A Spotlight Report – How people feel about living in Medway focusing on Rainham and Twydall (August 2024)
- A Spotlight Report – How people feel about living in Medway focusing on Chatham (September 2024)
- A Spotlight Report – How people feel about living in Medway focusing on Hempstead, Wigmore and Parkwood (October 2024)
- A Spotlight Report – How people feel about living in Medway focusing on the peninsula villages of Allhallows, Cliffe, Cliffe Woods, High Halstow, Isle of Grain and Stoke (January 2025)
- A Spotlight Report – How people feel about living in Medway focusing on the peninsula villages of Chattenden, Hoo, Wainscott, and Upnor (February 2025)
- A Spotlight Report – How people feel about living in Medway focusing on Gillingham (March 2025)
- A Spotlight Report – How people feel about living in Medway focusing on Halling and Cuxton (April 2025)
- A Spotlight Report – on the Building Blocks of Life, focusing on the locality of Rochester (TBC)

Healthwatch Medway and Healthwatch Kent

- NHS Hospital Discharge – Healthwatch Kent and Healthwatch Medway feedback from December 2021 to November 2022 (January 2023)
- Change Through Integration of VCSE in Service Development and Delivery (April 2023)
- Primary Care: What People Have Told Us about Dentistry (August 2023)
- The Experience of Mental Health Services from those with Drug and Alcohol Issues (May 2024)
- From Service To Civilian – A local perspective on how support for veterans evolves after discharge from service (August 2025)
- Kent Young Minds, Hidden Struggles: Perceptions of self-harm from Children and Young People, Professionals and the Medway and Swale Community (August 2025)
- Primary Care: What people have told us about pharmacy
- Medway & Swale Population Health Management: Focusing on Culture
- What Have People Told Us about Their Experiences with Pharmacies?
- Primary Care: What People Have Told Us About General Practice (April 2023)
- A spotlight report – What Did People Tell Us about Housing and Homelessness? (March 2025)

Healthwatch Medway in partnership with Carers First, Better Together

- Finding and understanding the needs of ‘hidden unpaid carers’ in Medway (September 2020)

Hood and Woolf

- Kent and Medway Children and Young People’s Mental Health Services Procurement: Report on Engagement Activity and Outcomes (January 2024)

Kent and Medway Integrated Care Board

- How the voices of children, young people and families are gathered and how they are used to improve their experience and outcomes (September 2025)

Medway and Swale Health and Care Partnership

- Medway and Swale Health and Care Partnership – Communications and Engagement Group – Activity report (September 2023)
- Medway and Swale Health and Care Partnership Winter Plan
- Medway and Swale Health and Care Partnership – Engagement Inequalities report

Medway Council

- Child-Friendly Medway Annual Report (2021-2023)
- Child-Friendly Medway Annual Report (2023-2024)
- Child-Friendly Medway Annual Report (2024-2025)
- Digital Resilience Project Children and Young People's *Feedback*
- Public Health *Cumulative Impact Assessment*

Medway Public Health

- Medway Health and Wellbeing Survey – All Analysis (August 2023)
- Medway Health and Wellbeing Survey – Alcohol Analysis (August 2023)
- Medway Health and Wellbeing Survey – Food Analysis (August 2023)
- Medway Health and Wellbeing Survey – Vaping Analysis (August 2023)
- Medway Health and Wellbeing Survey – Oral Health Analysis (August 2023)
- Joint Local Health and Wellbeing Strategy Children and Young People Survey Analysis

Medway Parents & Carers Forum

- SEND Comparison Survey – Educational Support, Health Services, Short Breaks and Cost of Living

Medway Voluntary Action: Involving Medway & Swale

- Medway South PCN Pilot: *Engaging with Harder To Reach Service Users (includes PowerPoint on Living with Obesity - A community health research project to explore the practicalities for people living with obesity) (March 2022).*
- Research Summary for Medway and Swale Clinical Commissioning Group – Improving Diabetes Care

Medway Voluntary Action: Community Health Catalyst Programme

- Local Asset and Signposting Plan – Medway Help the *Ukrainians (June 2023)*
- Vulnerable Migrants Listening Event *Report*
- Be You Project (Chatham Group) Listening Event *Report*
- Homelessness Listening Event *Report*
- Gypsy, Roma, Traveller Listening Event *Report*
- Substance Misuse & Drug and Alcohol Dependency Listening Event *Report*
- Medway Help the Ukrainians Listening *Event*
- Medway Pride Event – LGBTQIA+ *Group*
- Listening Event Report – *BAME*
- Multi-Morbidities Report – Listening Event *Report*

Medway Voluntary Action and Medway and Swale Health and Care Partnership

- Improving Services for Chronic Obstructive Pulmonary Disease (COPD) across Medway and Swale (June 2023)

Medway Youth Council
- MYC Conference Report 2025 (February 2025), Rose Stokes

Mental Health Voice
- Local Mental Health Network meetings – What are people telling us about mental health care? (March 2025)
- Local Mental Health Network meetings – What are people telling us about mental health care? (June 2025)

Tempo
- Tempo Time Credits Involving Medway & Swale (2023)

Tonic
- Local Systems for Supporting Young People Who Need Both Social Care and Mental Health Services – Medway Review (includes Appendix A [System review of children and young people accessing specialist mental health services across Medway – literature review], Appendix B [Medway Young People's Mental Health Online Offer] and Appendix C [Timelines]) (2021)

University of Greenwich
- Let's talk about food and nature in Medway – Highlights from survey responses, community workshop results and food waste log tree (July 2024)

Author Not Specified
- Positive Masculinity and Female Empowerment Project – Children and Young People's Feedback
- Access to Green Spaces in Medway Survey (PDF)
- Family Physical Activity Survey (PDF)
- Parenting Services and Workshops - Collated V4
- Mental health and emotional wellbeing support services for children and young people who are autistic or have ADHD in Medway: report on engagement activity (includes – Summary of recommendations and implementation plans following ADHD-ASC project) (September 2024)

EK360

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