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# Spaces of participation

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# Spaces of participation: Exploring the characteristics of conducive environments for citizen participation in a community-based health promotion initiative in a disadvantaged neighborhood

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#### ABSTRACT

Research has shown that community participation in health programmes is vital to ensure positive health outcomes and sustainable solutions. This is often challenged by difficulties to engage socially disadvantaged population groups. Through ethnographic fieldwork in a community initiative in a disadvantaged neighbourhood in Copenhagen, Denmark, we explored which factors contributed to a conducive environment for participation. Data material consists of observation notes taken during fieldwork in a community hub from January 2020 until August 2021 and 19 semi-structured interviews with professional stakeholders and participants. We applied the analytical concept of space to elucidate how the organizational, social, and physical environments played important roles in ensuring possibilities for participation. We termed these environments Spaces of Participation. Our results highlight the importance of ensuring spaces that are flexible, informal, and responsive when engaging those who are hard to reach.

# 1. Introduction

Within health promotion and prevention, research on the social determinants of health has increased engagement in community health-promotion interventions (Marmot et al., 2010; South, 2014), including coordinated, multi-setting initiatives (Ewart-Pierce et al., 2016; Toft et al., 2018; Vella et al., 2018). Studies find increasing evidence that community participation has a positive impact on a range of health outcomes (Haldane et al., 2019; O'Mara-Eves et al., 2015). Additionally, participation is often associated with increased ownership and empowerment of the target group (Fritz and Binder, 2018).

Nevertheless, many initiatives targeting disadvantaged neighbourhoods struggle to engage socially disadvantaged population groups (Garcia-Dominic et al., 2010; Goedhart et al., 2021; Vanleene et al., 2017). Studies have shown that residents from disadvantaged neighbourhoods are less likely to participate in health programmes and in health research compared to the majority of society (Koopmans et al., 2012) and that co-creation approaches often fail to engage residents (Carlisle et al., 2018; Lombard, 2013). Previous interventions show that participation in community initiatives may be hampered by financial or

transport-related challenges, distrust or fear of authorities, lack of incentive (Pestoff, 2006), lack of personal resources and mental capacity (Christensen et al., 2016; Jakobsen, 2013), lack of knowledge and skill (Jakobsen and Andersen, 2013), communication difficulties, limited time frames, and lack of information and awareness in relation to health programmes (Fung, 2006; Vanleene et al., 2017).

A scientific literature review exploring the role of community participation in improving the health of disadvantaged populations found that elements such as power-sharing and collaborative partnerships were key to achieving positive health outcomes (Gyril et al., 2015). However, no clear strategy to ensure participation by those who are hard to reach was identified. Moreover, participation research rarely focuses on processes to maintain participation over time, and contextual and relational factors are often not addressed.

The objective of this study is to investigate factors that contribute to a conducive environment for participation in a health promotion initiative located in the disadvantaged neighbourhood of Tingbjerg in urban Copenhagen, Denmark. We use the concept of space to shed light on how the environment structurally, socially, and physically shapes (enables and constrains) possibilities for participation and consequently

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how space-making might inform approaches to participation.

# 1.1. Conceptualizing participation

Participation is a widely used concept within community development (Durose et al., 2012; Greenhalgh et al., 2016; Vanleene et al., 2017) and often used interchangeably with concepts such as involvement, engagement, co-creation, co-design and co-production (Brandsen and Honingh, 2016; Tortzen and Annika, 2015).

Many scholars underline the importance of power when it comes to 'genuine' participation contra simple tokenism. For many years, Arnstein's ladder of participation (Arnstein, 1969) has been applied as a primary framework for citizen participation emphasizing high levels of citizen power as a primary indicator of 'genuine' involvement (Arnstein, 1969; Kamruzzaman, 2020), often ranging participation from manipulation to citizen control. Often such views address participants as a homogenous group of beneficiaries or 'the poor', evoking the assumption that recipients share motivations and interests and will all participate in the same manner (Kamruzzaman, 2020).

The ladder perspective has been criticized for a linear and static view on participation, neglecting the 'fluidity and flux of participation in practice' (Fritz and Binder, 2018). Some scholars even argue that the paradigm of participation is tyrannical because processes of ensuring participation often mask existing power differences (Cooke and Kothari, 2004; Kamruzzaman, 2020). Cooke and Kothari (2004) point to a methodological tyranny where certain participatory methods dominate and are applied uncontested in spite of them leaving little space for participation (Cooke and Kothari, 2004; Kamruzzaman, 2020). This usually implies participatory workshops, citizen meetings, as well as planned and facilitated processes as the golden standard, and 'users' being invited to participate in the co-design or production of services defined by others (Cornwall, 2002). When trying to involve citizens, especially those who may be so-called 'hard to reach' due to social, financial and health vulnerabilities, approaches are often characterized by an uneven power distribution, and at worst there is a lack of participation from those who would benefit the most (ibid), resulting in unsustainable solutions. Other scholars argue that approaches to participation have potential to be dynamic and transformative, creating new spaces and opportunities (Kamruzzaman, 2020; Knibbe and Horstman, 2019). Yet others highlight the need to explore how participation is constructed and situated (Fritz and Binder, 2018).

# 1.2. Participation spaces

By applying the concept of space as an analytical lens, this paper focuses on the circumstances and approaches through which participation can be enabled. Space relates to participation in the sense that spaces can both enable and constrain action and hence participation (Cornwall, 2002; Lefebvre et al., 2013). The concept of space is most often coined as a construct defined by the meaning, attributes, and regulations we install in a given place, setting or set of relationships (ibid). Fritz and Binder, drawing upon Setha Löw's sociology of space (2016), propose viewing participation as relational space, stressing that space is a 'relational arrangement of social goods and people in places' (Löw in Fritz and Binder, 2018, p, 5). Löw posits that space is both physical and social, and that it has an action and a structure dimension, where the relational arrangement of social goods and people is structured by rules and resources that sanction action while simultaneously being a product of the action taking place (re)producing structures (Fritz and Binder, 2018; Löw and Goodwin, 2016). Fritz and Binder draw on this notion, stressing that participation is shaped by the specific characteristics and constellation of the agents entering an action situation as well as the 'rules and norms in which they are embedded and the resources at their disposal' (Fritz and Binder, 2018, p, 6). Fritz and Binder also underline the link between power relations and participation and the importance of looking at the construction of participation spaces and

access possibilities, and how these shape relationships between participants and consequently participation (ibid). Following this notion, the environment (both social and physical) plays a vital role for the possibilities of participation (Breuer, 2003; Hand et al., 2012), for instance through physical or social inclusiveness or exclusion. We draw on the notion of participation as relational space to look into how a health-promoting community initiative in the disadvantaged neighbourhood of Tingbjerg provides conducive environments for participation (Cornwall, 2002; Fritz and Binder, 2018; Lefebvre et al., 2013).

#### 2. Materials and methods

The case of this study is a community restaurant located in a community hub in the disadvantaged neighbourhood of Tingbjerg in the outskirts of Copenhagen, Denmark. The community hub and restaurant were developed and implemented within the framework of Tingbjerg Changing Diabetes (TCD) (www.tingbjergchangingdiabetes.dk). TCD is a long-term research-based community initiative that targets social inequity in health by engaging and empowering residents and the local community of Tingbjerg to act for better health and well-being and prevent diabetes.

Tingbjerg is a prime example of the vast geographical and social inequities in health present in Danish society. The neighbourhood is considered socially disadvantaged due to socioeconomic characteristics such as low employment rates, low education and income levels, and high crime rates compared to the general population. Health issues prevail with high rates of mental health issues and incidences of diabetes and lung diseases being 2–3 times higher than in the general population (Haarløv-Johnsen et al., 2014; Landsbyggefonden, 2020). This makes the neighbourhood an interesting case for applied research addressing issues of inequity in health and citizen participation among those who are hard to reach.

TCD follows the Supersetting approach, which aims to build capacity and promote health and well-being through the coordinated engagement of multiple stakeholders in multiple settings across Tingbjerg (Bloch et al., 2014; Tørslev et al., 2021). TCD thus operates through multiple activities, of which the community hub and restaurant are but two.

The community restaurant had a primary purpose of engaging residents in a gastronomic community, building social and gastronomic capacity and mobilizing residents' resources related to cooking, service, responsibility and innovation. The structural and organizational framework of the community hub and restaurant rests on the Supersetting principles (Bloch et al., 2014):1) integration, to ensure that activities are implemented through coordinated action across the boundaries of specific settings, 2) participation, to ensure that people are motivated to take ownership of processes of developing and implementing activities, 3) empowerment, to ensure that people acquire skills and competencies to express and act on their visions and aspirations, 4) context-sensitivity, to ensure that everyday life challenges of citizens and professionals are respected and considered when developing and implementing activities, and 5) knowledge, to ensure that scientific knowledge is produced from action and used to inform action. The principle of participation became a central contributor to the way participation was approached in the community hub and restaurant. It was negotiated and defined by TCD partners at several meetings during 2020, resulting in an overall definition of the principle as follows: "The principle of Participation means that we involve residents in the development and implementation of activities at a level that best suits their wishes and capabilities. We do this to strengthen motivation and engagement as well as to secure co-ownership of the activity".

### 2.1. Methods

The study is based on ethnographic fieldwork carried out from January 2020 to October 2021 in the community restaurant located in Tingbjerg's community hub. Ethnographic fieldwork was applied to explore the subtleties and nuances of the practice of participation. This in-depth approach allowed us to obtain participants' personal experiences and accounts as well as to experience the sociality and materiality of the place (and spaces) on our own bodies (Madden, 2017). Ethnography allows for methodological emergence that is especially valuable for investigating processes and contextually embedded practices such as participation. In an action-research design, the first author took part in the development of the community restaurant and was present in the community hub 2-3 days per week from January 2020 to August 2021, participating in the weekly restaurant events and meetings held between the professional stakeholders. Action research is an approach that allows research and action to inform each other constantly, thus ensuring us emergent learning, testing and adjustment (Reason and Bradbury, 2001) that could continuously inform approaches to participation. The remaining authors participated in strategic meetings with the professional stakeholders and in discussions and decisions concerning the principle of Participation. Applying action research was useful to our investigation of participation in the community hub because it allowed for participation to be a defining part of our methodology, in which the goal was to achieve an equal relationship and shared action and decision making between researchers and community members (Arieli et al., 2009; Heron and Reason, 2001; Olesen and Nordentoft, 2013). This equal relationship entailed including us in discussions on participation as well as allowing us to be present when residents were present in the community hub. In all interview situations, informed consent was received prior to the interview, and when interacting with participants the first author was transparent about her position and purpose in the field. However, with the open and dynamic nature of the field, with many people going in and out of the community hub, it was not possible to systematically inform all participants subject to observation.

#### 2.2. Data material

Data material was collected during fieldwork and is depicted in Fig. 1.

Field notes from observations of the development process and restaurant evenings were written down on location and post visits in the hub (Spradley, 1980). Observations were initially broadly focusing on the involvement of residents in the development of the community restaurant, and over time became more oriented towards participation

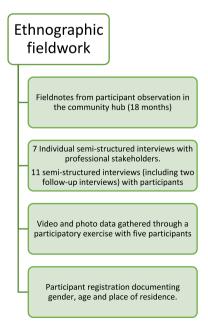


Fig. 1. Overview of data collection and material.

practices and how participation was enabled. Individual interviews were conducted with professional stakeholders involved in the community restaurant from the partner organizations Copenhagen Hospitality College, Steno Diabetes Center Copenhagen and the Social Development Plan, with the purpose to get organizational perspectives on the processes of ensuring participation. Professional stakeholders were all, except two leaders, practitioners working in Tingbjerg on a daily basis. Residents using the restaurant and hub were recruited for interviews using purposive sampling (Bowling, 2002; Palys, 2008) as our aim was to include a variety of participants who came to the restaurant on a regular basis. Interviews focused on experiences and motivations for participating in the restaurant and participants' views the place and the professional stakeholders. Interviews were primarily carried out in the community hub. One took place at the local school. They lasted between 20 min and 120 min. The gender division between participants was seven females and five males. Video and photo data was collected with two children, a woman and two men who used an iPad to make small interviews with each other and to film and take photos of the hub and the restaurant during the restaurant cooking sessions. Participant registration was made on every restaurant evening.

All participants, including many of the observed participants experienced vulnerabilities in some way. They were thus long-term unemployed and/or struggled with social, physical or psychological difficulties at the time of the study. We use the term 'hard to reach' to refer to people who may be hesitant to participate in community-based activities due to vulnerabilities. While this is done to recognize the hardship experienced by many of those involved in the study, we also acknowledge the underlying power asymmetries of being labelled 'hard to reach' and that being 'hard to reach' may be as much a consequence of researchers' methodological inappropriateness as of actual vulnerabilities.

# 2.3. Data analysis

Data analysis was abductive to take advantage of the long-term fieldwork and to work 'closely with [...] observations as they unfold over time' (Timmermans and Tavory, 2022). We thus engaged in an ongoing dialogue with professional stakeholders and participants on the findings. Analysis was carried out in two phases. In the first phase after approximately 9 months of fieldwork, we conducted a systematic coding and thematic analysis of interview material and field notes (Braun and Clarke, 2014). Thematic analysis was used to generate empirical codes and general themes across the data material (ibid) In this phase we applied several different analytical readings and codings, which resulted in a broad thematic overview of outcomes and factors influencing participation. In the process of identifying themes and extracting meaning from data, the concept of space emerged as an empirical term used by some study participants. We thus chose to use it as a sensitizing concept to analyse possibilities for participation (Bowen, 2006). In the second phase, after initial analysis we chose to let the concept of space guide data collection exploring the meaning of the environment more directly through observations and interviews. We were thus able to get direct feedback from participants on observations related to participation practices, motivation, and space. This phase of data collection was followed by a new process of coding and thematic analysis to specifically address the relationship between participation and space. Ultimately three central themes related to space were identified: 1) Organizational space, 2) Social space and 3) Physical space. These categories are unfolded under findings. All interviews were recorded and transcribed verbatim. Interviews and field notes were coded in NVivo12.

# 3. Findings

Our findings refer to what took place in Tingbjerg's community hub and restaurant. These make up an important context for the study and we thus start out by providing some details about this context. T. Termansen et al. Health and Place 80 (2023) 102996

The community restaurant in Tingbjerg is a one day a week cooking session combined with restaurant dining. The restaurant most often serves a three-course dinner, cooked by residents under the guidance of a professional chef. When the food is ready, other residents can come and buy a meal. Workshop participants eat for free, and all participants help set and clean the tables. Before COVID-19 there were no strict restrictions and requirements for the number of participants, target group or continuous participation. Residents could sign up from one time to the next or show up unannounced. The primary purpose of the restaurant was to promote social relationships and capacity building in the community and to provide learning related to cooking and social skills. The restaurant was developed and driven by TCD partner representatives from Copenhagen Hospitality College with professional cooking and teaching expertise, the Social Development Plan in Tingbjerg with in-depth local knowledge and networks in Tingbjerg and Steno Diabetes Center Copenhagen with research expertise.

The restaurant is located in a run-down kindergarten converted into a community hub which is depicted in Fig. 2. The hub houses small community gardens, chickens and bees, and the former playground has been converted into a recreational area with a carpentry workshop, bicycle repair shop and fireplace. Currently the hub hosts several different organizations and a range of activities. Thus, the hub is often vibrant and full of activity.

Participants for the restaurant were recruited through previous activities, professional stakeholders' networks and a restaurant Facebook page. As several residents were already using other activities in the community hub, many were also introduced to the restaurant by simply

being at the hub. More than 200 different residents were registered as having participated in either the cooking or the restaurant dining between February 2020 and January 2021. While half of all participants had participated in the restaurant twice or more, 17 residents were regulars, attending almost every time. Most were single adults or families with children.

In the following sections we present factors that promoted a conducive environment for participation in the community hub and restaurant.

#### 3.1. Organizational space: a flexible framework for participation

The following field note excerpt exemplifies how the structural framework of the community restaurant played a central role for the ways participation was shaped and made possible.

Field note excerpt: The children come often to the restaurant. They usually come without their parents. In the beginning they would mostly play outside and run around the facility playing with things, picking up a guitar or some tools and running around, but they have started to join the cooking workshops more and more. Today they are eager to help serve the food in the restaurant. The chef lets them help under supervision. They seem to like waiting on tables and take it very seriously, continuing to ask for more assignments. They also help make the soda. Some of the elderly Turkish women go back and forth between their gardens and the restaurant. They seem interested but hesitant about joining the cooking. Next to them, Gabriel and Peter are lighting the bonfire while Sera sits quietly on a bench as always just waiting for the

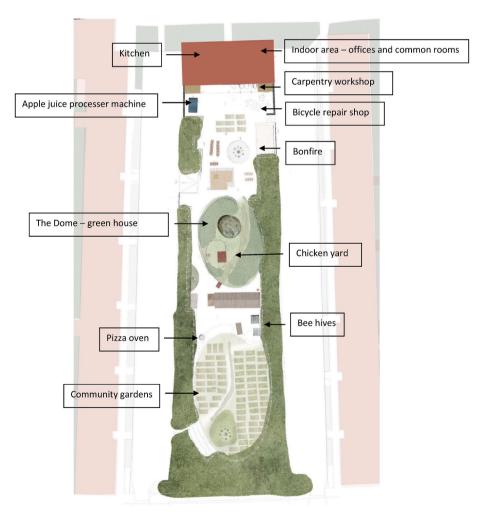


Fig. 2. Map of the community hub located in between houses in the backend of Tingbjerg.

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food to be ready. When it is time to eat, we all sit down at the tables and begin to pass the food. After a while, the two Turkish women join in and start eating.

The Supersetting principle of participation was an important contributor to the way participation was approached by professional stakeholders. Based on the definition of the principle focusing on coownership and engagement, professional stakeholders and the research group from TCD began a process of operationalizing the principle during the summer of 2020. This resulted in guidelines stressing diverse participation, different levels of involvement, and paying attention to residents' needs and capabilities. The principle of participation thus represented certain values to adhere to, rather than strict prescriptions for action, providing a flexible space for participation. A central feature of the approach to participation became an openness towards different kinds of participation to ensure diverse participation and retainment of those who would normally not participate. The chef explained how this encouraged progress in engagement over time:

Jim: So, with the approach that people are able to go in and out of the place, it being such an open space [...], it seems to be a good part of the restaurant [...]. If it became too tight, if there were too many rules [...] then we would lose the part [...] where people can come and sense the place; "is this something for me?" (Professional stakeholder).

The quote shows that the exact ways of approaching the principle of participation were not set in stone. Rather, it seemed like a subtle approach that laid the groundwork for the restaurant and hub, but which also required a certain openness to sense participants' capabilities. The following quote comes from a participant who, due to medical conditions, easily became exhausted and tired. She mentioned on several occasions how she appreciated that she could participate in her own way, not playing an active role in the cooking, but still feeling part of the restaurant.

Nina: And the chef is just really nice and understands when I say "hey, I've invited a bunch of children". That's okay. And if I sit and draw with them to keep them occupied, that's fine. I can still eat here for free, even though I technically haven't helped with the cooking. (Participant).

Although it was sometimes hard to pinpoint exactly what motivated participants to engage actively in the community hub and restaurant, several field notes were filled with reflections on the structural framework underlining the flexibility of the approach allowing for participation to take place in different ways, and an openness where everyone was welcome. In practice this meant that residents could participate despite whatever difficulties they experienced and that it was possible to take on roles and responsibilities that were not necessarily predefined. One professional stakeholder would often stress that their approach contrasted the usual way of doing things. This, he explained, meant that rather than making meticulous action plans, they found it more fitting to test ideas and let residents' responses guide the subsequent steps. This was also based on experience from more formal and organized events, which often would exclude vulnerable individuals who did not feel comfortable in such a setup. The importance of a flexible approach became clear when external professional stakeholders and the chef on a few occasions tried to facilitate co-creation by gathering residents and inviting them to brain-storm ideas for the restaurant or the hub. Despite the informality and often impulsive nature of such co-creation sessions, which were often organized with a short notice outside as part of a dining event or inside a meeting room most participants either did not seem to know how to contribute or did not understand the purpose. It was difficult to find an ideal format that would ensure wide participation and active engagement. While the very formal and organized format was rarely chosen because it excluded the most vulnerable individuals, the less formal and more ad hoc sessions caused confusion or doubts among participants regarding purpose and scope. The co-creation sessions contrasted many of the other situations in the restaurant where residents could drop in and out and where participation was not expected to unfold in a certain manner. In many ways it seemed as if informal talks and observations made by the chef were more effective in providing information about the need for adjustments or changes to the restaurant than organising a co-creation session. A professional stakeholder from the social development plan explained how approaching residents the right way was a general challenge in Tingbjerg:

Stine: There are so many 'project-makers' with their predefined ideas about what will be good for the residents, and they have the best intentions, but we end up running around looking for residents to participate in something that we invented. Yesterday a person from the health-house came to do a health café, which they do every Tuesday. And this is very relevant to many residents, but no one ever shows up. And they don't show up, because vulnerable people don't really sit down with their calendar and write these offers down [...]. When something urgent happens and they need help it needs to be now, and preferably yesterday. (Professional stakeholder).

The many projects and facilitated co-creation attempts with predefined and structured agendas contrasted the approach of the community restaurant, she later explained. Surprisingly, despite the seemingly failed co-creation, interviews and informal conversations with several users of the restaurant and hub revealed that they still felt that residents were involved. They explained how it was easy to talk to the employees and share their ideas. Some would also plant, paint or build things for the hub at their own initiative. The leader of the social development plan highlighted how the community hub in his eyes broke conventions concerning involvement and co-production because the place belonged to the residents.

As our empirical analysis has shown, the community hub became a venue where residents could participate in different ways and where just being present was as appreciated as being actively engaged. Organizational space was ultimately characterized by flexibility and responsiveness of professional stakeholders, which allowed for participation to be based on capabilities and for new roles and responsibilities to arise.

# 3.2. Social space: tolerance and diversity

Most participants whom we spoke with during informal conversations and interviews expressed that the social environment was an important motivational factor for their participation. A participant explained how the restaurant provided a space where he could get more familiar with other residents:

I: Have you got to know anyone new here?

Carl: Yes, people I've only met in the hub, but also people who I've seen in the streets and then been able to talk with here. Sometimes it can be a little difficult when you've seen someone 30 times in the streets to just go up and talk to them. (Participant).

From observations, we saw that participants became more familiar with each other over time, and they began taking responsibility for the social atmosphere in the restaurant by suggesting ways of sitting, setting the tables, helping each other with personal issues or correcting each other's' children when they were too noisy. The following quote exemplifies how the social space was also established through the practical and physical setup in the restaurant. One resident mentioned that the seating arrangement created an intimacy and a way of getting to know each other:

Casper: [...] And then we're seated in small groups, maybe 4–6 people and you just get closer to each other. And that's what we're doing. It becomes a sort of close group connection, just like if you had to work in teams. For example, I was sitting at the same table as the boys, and one of them helped me fix my bike yesterday. So, every time we get to know people a little better. (Participant).

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This resident compares the seating experience to a workshop where you work in teams. This prompted a connection with some local boys. Hence, it became evident that the continuous meetings in the familiar setting of the restaurant promoted a social connection and familiarity that led some residents to also socialize beyond the restaurant. Another resident, who had long been annoyed that many activities tended to attract residents of the same ethnicity, mentioned how she appreciated that the restaurant stood out as an open, inclusive environment:

Amira: This (the restaurant) sets itself apart because it isn't targeting one specific group. People of different ages and different types come here. That's what I like compared to some of the other activities where it's only for the Pakistanis, people from Morocco or Somalia or just women ... over 40 (laughs) [...]. (Participant).

This participant had been struggling to find activities that she felt comfortable with because she experienced that only a rather narrow and often ethnic homogenous group of residents used the local activities in the neighbourhood. Most of the interviewed participants found the diversity appealing and would often stress how it contributed to a sense of tolerance. Karen, a participant who was also employed as a cleaning lady, expressed a sense of equality in the community hub and restaurant, stressing the positive community:

Karen: There's a tolerance that I don't see in other places. [...]. In general, people here, you feel like you are equal, just like everybody else. You don't feel like you are worth less. And you're involved in what happens. (Participant).

As in the quote, several study participants often related the tolerance of the place to the professional stakeholders, whom they experienced treated them with respect and as equals. This was often contrasted with their experiences with other parts of society such as the employment system, previous jobs or even just the local service employees in the neighbourhood, who in the words of a participant would "never trust them".

Although most participants characterized the social space in the hub and the restaurant as tolerant and diverse, a few regular participants found the openness uncomfortable. A mother who used to come to the restaurant explained how, after COVID-19, she no longer felt like she knew anyone because the place was full of strangers, and she missed how it used to be. This mother explained that she felt a general scepticism and hesitance towards strangers, something that made her uncomfortable in the very open arrangement of the restaurant. For that reason, she had stopped coming. As such, not all needs could be met by an open social space. However, the general picture among the regular participants was that the inclusive social space fostered by openness towards diversity and the lack of requirements to participation functioned as a site of tolerance which was a motivational factor, which promoted participation and social bonding.

#### 3.3. Physical space: the perfect imperfectness

The importance of the physical environment for residents' motivation to come to the community hub and restaurant was clear from our many observations and informal conversations. The community hub was referred to as an oasis by many of the residents who came there on a regular basis. This, some explained, was both related to the almost hidden location in the local community, tucked in between brick buildings and concrete, and to the many trees encircling the place making it appear almost as a tiny forest. As the following field note excerpt shows, the place was characterized by its many micro-spaces, which allowed residents to engage in bonfire, cooking, gardening or woodwork at the same time:

We prepare a part of the meal on the outdoor bonfire today. Peter demonstrates how to split logs for the fire. After he is done, he starts tidying up in the woodshop. Several other residents start showing up, and they all gather around the bonfire. It feels comfortable. A boy

mentions that it almost feels like camping with friends. A broken bicycle stands by the wall next to an old orange upcycled camper. Flowers are in bloom in the many wood cases and Nina starts picking some of them to use in the servings. She also picks some wild berries in the garden together with a few of the children. When the dining ends, Peter demonstrates a wood porcupine that he made the other day which he has attached to one of the tables for the children to hammer nails into. He ends the evening by picking up a bucket of blackboard paint and starts painting part of the outdoor wall so that the children can draw on it the next time.

As the excerpt shows, the community hub was characterized by its many micro-spaces, its green outdoor area and worn facilities, but cosy atmosphere. Participants would often also stress the 'ugliness' of the place, but not in a negative way. As one participant mentioned, this was the reason she liked it there. A regular participant elaborated on this, underlining the 'imperfectness' of the place:

Peter: [...] I mean if you look out (looking out the window), it looks terrible with a crooked door that's red and a gutter that's hanging a bit and a black shed with a roof that's halfway done [...]. It will never be perfect down here. And it shouldn't be. (Participant).

The quote highlights that the informal nature of the hub was central for making participants comfortable. For this participant, the worn appearance was an important motivator for engagement as it allowed him to fix, build and construct things, almost as he pleased. For many, the physical environment in the hub matched the sometimes odd and 'outsider' status that many participants had. Nina, who had become a regular and strong contributor to the community hub and restaurant early on, would sometimes sit with some of the Turkish ladies in the back and drink tea. She explained how it was nice being able to hide:

Nina: I think it is cool that it is [...] not very institutional, and we have all these giant green trees and wilderness that just make ... breathing spaces or hiding places where you can just sit on a bench without feeling like you should have put on your nice clothes [...]. not feeling like you are on display like they did in the culture house because it's sort of open all the way around. [...]. I mean the giant big open room where every sound sort of lingers [...]. (Participant).

Not being on display was important to many participants, many of whom had various physical and/or psychological challenges that sometimes made it difficult for them to participate fully in the cooking or the social activities. Many of the participants would stress how the physical surroundings set the place apart from more established and formal places. Both participants and professional stakeholders would often compare the hub to Tingbjerg's culture house (see Fig. 3). The culture house was built recently right next to the local school in Tingbjerg, with impressive architecture, many open spaces and lots of light.

However, the culture house was also a place where some residents felt like they were on display. The physical and material setting of the community hub had a clear influence on residents' participation and sense of ownership. One participant explained how the combination of various specific physical attributes of the indoor setting helped him approach professional stakeholders more easily:

Peter: It is one floor. You do not have to walk to the second, third, fourth or fifth floor to find an employee who sits with their head buried in papers. [...]. Then it is easier when you just pass each other in the hallway on the way to the kitchen to say "x, I need to talk to you" [...]. It's the whole of it that makes it special. (Participant).

He underlines the meaning of accessibility – that he doesn't have to *enter* someone's office, that he can just enter the building and easily find an employee. This also stresses the informality of the place, not having traditional offices with closed doors, nor rules encouraging silence, dress codes etc.

As mentioned, some participants were motivated by the worn-down





**Fig. 3.** The outside area of the community hub (top photo) and the first floor reading area in the culture house (bottom photo).

condition of the hub, while others enjoyed the outdoor spaces where they could be present, but not obliged to participate in a specific activity. As such, the un-institutionalized nature of the community hub and restaurant, its many functions and micro-spaces enabling participation in multiple activities or, oppositely, to hide in the hub fostered residents' motivations to participate.

# 4. Discussion

In the present study we have shown how the community hub and the restaurant shaped the possibilities for participation through what we identified as organizational, social, and physical spaces. We have shown that organizational space was about being responsive and providing structures that allowed for different kinds of participation to take place simultaneously and made space for new roles and assignments based on participants' resources. Our study also showed that the social space was characterized by inclusiveness and tolerance ensuring diversity among participants and that the physical space was informal and uninstitutionalized providing participants with hiding places and a sense of belonging. These spaces became greatly influential to the motivation of participants and to the meaning and value that people ascribed to the place. More specifically they influenced how the community hub became an environment providing certain spaces of participation.

# 4.1. Spaces of participation

Analysing participation as a spatial practice helps draw attention to the ways in which the production of space in itself creates possibilities for action (Cornwall, 2002). It helps us understand how participation is shaped by the constellation of agents, of rules and norms, of physical and social structures, and of power relations (Fritz and Binder, 2018; Löw and Goodwin, 2016). In other words, as we have shown, the concept of

space may be as important to consider when attempting to get people to participate as the facilitation or methods applied. In our findings, we saw how both professionals and participants contrasted the community hub and restaurant with other conventional settings or projects with strict requirements to target groups and participation. Rather they were perceived as social sites of tolerance and openness. The hub and restaurant not only contrasted the more standardized and conventional forms of project making, but also the more categorical views on participation placing power at the center (see Arnstein, 1969). These views assume that citizen power or complete citizen control is a primary criteria of success (Collins and Ison, 2006). In contrast to this, in the community hub, we saw a way of participating that was dynamic and where roles and the value of these roles were based on interests and motivation rather than how much power participants were 'given'. In fact, when professionals tried to 'give' power to participants by facilitating co-creation, we saw that a power shift was difficult. On the basis of the values that both professionals and participants attached to participation, the community hub and restaurant thus became venues providing spaces of participation that were dynamic, open and inclusive.

Physical surroundings such as architecture and the ways physical spaces are organized also play a role and can function as a means of control over social interaction and behaviour (Cornwall, 2002; Foucault, 1975). Participation might change with location, due to simple things such as the arrangement of chairs and tables, the surrounding atmosphere, cleanliness etc. This was quite evident in participants' and employees' comparison between the community hub and the culture house, preferring the 'ugliness' of the hub. Our findings showed that the physical environment of the hub with its worn-down condition, many home-built projects in constant progress and micro-spaces with not one but multiple functions appealed to participants as it made them feel comfortable and did not favour certain kinds of participation over other. The community hub was thus an example of a physical space structurally imbued with values that fostered participation among those who are normally 'hard to reach'. In their research on making new care spaces for the disabled, Knibbe and Horstman (2019) underline how many settings, institutions and buildings are characterized by processes of inclusion and exclusion. They talk about 'separations based on functional definitions of places' because many buildings and settings have been designed for a specific purpose, with a specific function (Knibbe and Horstman, 2019), as was much clearer in a place such as the culture house. Paradoxically a large part of present-day citizen involvement is characterized by a rather uniform approach to participation, with participatory workshops as the gold standard in participatory intervention design (Bønnelycke et al., 2019). Although these methods might be familiar and well-documented, easy to plan, evaluate and execute, they tend to exclude the most vulnerable, because they produce spaces that limit the agency of individuals who lack confidence, familiarity, status and verbal or written skills (Cornwall, 2002). Consequently, as our study shows, it is vital to consider how spaces are regulated and who owns them before initiating activities that require participation (Cornwall, 2002; Foucault, 1986).

# 4.2. Physical and social inclusion through ambiguous space

In line with our initial conceptualization of space, the rules and norms (the organizational space) of the hub and restaurant shaped the boundaries for participation and enabled change based on the constellation of agents entering the place (Fritz and Binder, 2018). This resembles what Knibbe and Horstmann (2019) refer to as a 'micropublic ambiguous place', where the ambiguity of the place (such as the multiple functions, the constant small changes in the setup and the fact that it was not targeted a specific group), seemed to support openness, transformation and transitions (Knibbe and Horstman, 2019). The hub can be conceptualized as what Foucault terms heterotopia, a space for the deviant which at one and the same time mirrors and disturbs the established space, providing different possibilities of inhabiting the

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space (Foucault, 1986). Clay and Schaffer (1984) use the term room for manoeuvre to describe how some spaces provide possibilities to reshape them and move their boundaries (Clay and Schaffer, 1984). In the case of the culture house in Tingbjerg (and many other functionally specific places) the room for manoeuvre can be viewed as narrow because participants are rarely involved in the formation of the space, while the hub and restaurant appeared to be providing participants with a wider room for manoeuvre, allowing them to shape both the physical space (by building, painting and planting) as well as the organizational and social spaces (by their contribution with skills, ideas or initiative). The ambiguity of the community hub seemed to decentralize power, enabling participants to engage in ways that were suitable to them. However, we also saw how some residents chose not to participate because of the openness and perhaps too flexible framework. This is testimony to the fact that even open spaces can also be excluding, and perhaps also testifies to the impossibility of the utopian quest for complete and total inclusion and participation for all.

#### 4.3. Practical implications

While previous research has documented that many initiatives struggle to ensure participation of the most socially disadvantaged groups, this study provides important insight on the importance of the concept of space by showing how a flexible approach motivates residents to engage. Considering spaces of participation in the development and implementation of interventions aimed at socially vulnerable groups, based on this study's findings in the form of cultivating open and flexible organizational space, inclusive social space and uninstitutionalized physical space, might lead to greater acceptance and consequently more sustainable results.

# 5. Conclusion

This study showed that the concept of space can be useful in exploring conducive environments for participation and interactions between professional stakeholders and residents of the local community. Focusing on ambiguous space, decentralizing power, and looking at how organizational, social, and physical environments shape participation practices and motivation may help ensure retainment and engagement of those who are hard to reach. The study findings underline that paying attention to context, referring to both the life circumstances of people and the places where health promotion is carried out, is key to ensuring participation. Positive outcomes of health promotion targeting those in vulnerable positions ultimately rely on strong and trusting relationships between professional practitioners and participants. Paying more attention to spaces of participation may thus ultimately foster more sustainable solutions to social and health problems.

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# Declaration of competing interest

The authors declare they have no conflict of interest.

# Data availability

Data will be made available on request.

# References

Arieli, D., Friedman, V.J., Agbaria, K., 2009. The paradox of participation in action research. Action Res. 7, 263-290. https://doi.org/10.1177/1476750309336718. Arnstein, S.R., 1969. A ladder of citizen participation. J. Am. Inst. Plan. 35, 216-224. https://doi.org/10.1080/0194436690

- Bloch, P, Toft, U, Reinbach, HC, Clausen, LT, Mikkelsen, BE, Poulsen, K, Jensen, BB, 2014 Sep 14. Revitalizing the setting approach - supersettings for sustainable impact in community health promotion. Int. J. Behav. Nutr. Phys. Act. 11 (118) https org/10.1186/s12966-014-0118-8. PMID: 25218420; PMCID: PMC4172849.
- Bønnelycke, J., Thiel Sandholdt, C., Pernille Jespersen, A., 2019. Co-designing health promotion at a science centre: distributing expertise and granting modes of participation. CoDesign 15, 128-141. https://doi.org/10.1080/
- Bowen, G.A., 2006. Grounded theory and sensitizing concepts. Int. J. Qual. Methods 5, 12-23. https://doi.org/10.1177/160940690600500304
- Bowling, A., 2002. Research Methods in Health: Investigating Health and Health Services, Open University Press.
- Brandsen, T., Honingh, M., 2016. Distinguishing different types of coproduction: a conceptual analysis based on the classical definitions. Publ. Adm. Rev. 76, 427-435.
- Braun, V., Clarke, V., 2014. What can "thematic analysis" offer health and wellbeing researchers? Int. J. Qual. Stud. Health Well-Being 9, 26152. https://doi.org/ 10.3402/qhw.v9.26152.
- Breuer, D., 2003. Community Participation in Local Health and Sustainable Development: Approaches and Techniques/[text Editing: David Breuer. World Health Organization, Regional Office for Europe, Copenhagen
- Carlisle, K., Farmer, J., Taylor, J., Larkins, S., Evans, R., 2018. Evaluating community participation: a comparison of participatory approaches in the planning and implementation of new primary health-care services in northern Australia. Int. J. Health Plann. Manag. 33, 704-722. https://doi.org/10.1002/hpm.252
- Christensen, U., Malling, G., Kristensen, E., 2016. Risk perception among vulnerable diabetes patients and citizens at risk in Copenhagen. Eur. J. Publ. Health 26. https:// doi.org/10.1093/eurpub/ckw174.047.
- Clay, E., Schaffer, B., 1984. Room for Manoeuvre: an Exploration of Public Policy Planning in Agricultural and Rural Development. Associated University Presse, Great
- Collins, K., Ison, R., 2006. Dare We Jump off Arnstein's Ladder? Social Learning as a New Policy Paradigm. Presented at the Participatory Approaches in Science & Technology, Edinburgh,
- Cooke, B., Kothari, U., 2004. Participation: the New Tyranny?, third ed. Zed Books, London.
- Cornwall, A., 2002. Making Spaces, Changing Places: Situating Participation in Development, IDS Working Paper. Institute of Development Studies, Brighton.
- Cyril, S., Smith, B.J., Possamai-Inesedy, A., Renzaho, A.M.N., 2015, Exploring the role of community engagement in improving the health of disadvantaged populations: a systematic review. Glob. Health Action 8, 29842. https://doi.org/10.3402/gha. v8.29842.
- Durose, C., Beebeejaun, Yasminah, Richardson, Jo, Rees, James, Richardson, Loz, 2012. Towards Co-production in Research with Communities. Arts and Humanities Research Council (Connected Communities).
- Ewart-Pierce, E., Mejía Ruiz, M.J., Gittelsohn, J., 2016. Whole-of-Community" obesity prevention: a review of challenges and opportunities in multilevel, multicomponent interventions. Curr. Obes. Rep. 5, 361–374. https://doi.org/10.1007/s13679-016-10.1007/s15679-016-10.1007/s15679-016-10.1007/s15679-016-10.1007/s15679-016
- Foucault, M., 1975. Discipline and Punish. Harmondsworth: Penguin.
- Foucault, M., 1986. Of other spaces. Diacritics 22-27.
- Fritz, L., Binder, C., 2018. Participation as relational space: a critical approach to analysing participation in sustainability research. Sustainability 10, 2853. https:// doi.org/10.3390/su10082853.
- Fung, A., 2006. In: Empowered Participation: Reinventing Urban Democracy, 2. print., and 1. Paperback Print. Princeton University Press, Princeton, N.J.
- Garcia-Dominic, O., Wray, L.A., Trevino, R.P., Hernandez, A.E., Yin, Z., Ulbrecht, J.S., 2010. Identifying barriers that hinder onsite parental involvement in a school-based health promotion program. Health Promot. Pract. 11, 703-713. https://doi.org/ 1524839909331909
- Goedhart, N.S., Pittens, C.A.C.M., Tončinić, S., Zuiderent-Jerak, T., Dedding, C., Broerse, J.E.W., 2021. Engaging citizens living in vulnerable circumstances in research: a narrative review using a systematic search. Res. Involv. Engagem. 7, 59. https://doi.org/10.1186/s40900-021-00306-w
- Greenhalgh, T., Jackson, C., Shaw, S., Janamian, T., 2016. Achieving research impact through Co-creation in community-based health services: literature review and case  $study.\ Milbank\ Q.\ 94,\ 392-429.\ https://doi.org/10.1111/1468-0009.12197.$
- Haarløv-Johnsen, P., Bloch, P., Aagaard-Hansen, J., Klinker, C.D., 2014. Beboerinddragelse og sundhedsfremme i de boligsociale helhedsplaner. Steno Diabetescenter Copenhagen, Copenhagen.
- Haldane, V., Chuah, F.L.H., Srivastava, A., Singh, S.R., Koh, G.C.H., Seng, C.K., Legido-Quigley, H., 2019. Community participation in health services development, implementation, and evaluation: a systematic review of empowerment, health, community, and process outcomes. PLoS One 14, e0216112. https:// 10.1371/journal.pone.0216112.
- Hand, C., Law, M., Hanna, S., Elliott, S., McColl, M.A., 2012. Neighbourhood influences on participation in activities among older adults with chronic health conditions. Health Place 18, 869-876. https://doi.org/10.1016/j.healthplace.2012.03.004.
- Heron, J., Reason, P., 2001. The practise of co-operative inquiry: research "with" rather than "on" people. In: Handbook of Action Research. Sage, London.
- Jakobsen, M., 2013. Can government initiatives increase citizen coproduction? Results of a randomized field experiment, J. Publ. Adm. Res. Theor. 23, 27-54. https://doi

- Jakobsen, M., Andersen, S.C., 2013. Coproduction and equity in public service delivery. Publ. Adm. Rev. 73, 704–713. https://doi.org/10.1111/puar.12094.
- Kamruzzaman, P., 2020. Exploring the nexus between participation and empowerment. J. Dev. Policy Pract. 5, 32–53. https://doi.org/10.1177/2455133320909926.
- Knibbe, M., Horstman, K., 2019. The making of new care spaces. How micropublic places mediate inclusion and exclusion in a Dutch city. Health Place 57, 27–34. https://doi. org/10.1016/j.healthplace.2019.03.008.
- Koopmans, B., Nielen, M.M., Schellevis, F.G., Korevaar, J.C., 2012. Non-participation in population-based disease prevention programs in general practice. BMC Publ. Health 12, 856. https://doi.org/10.1186/1471-2458-12-856.
- Landsbyggefonden, 2020. Strategisk Samarbejdsaftale Om Boligsocial Indsats. Lefebvre, H., Nicholson-Smith, D., Lefebvre, H., 2013. In: The Production of Space, 33.
- Print. Blackwell Publishing, Malden.

  Lombard, M., 2013. Citizen participation in urban governance in the context of
- democratization: evidence from low-income neighbourhoods in Mexico: citizen participation in Mexico. Int. J. Urban Reg. Res. 37, 135–150. https://doi.org/10.1111/j.1468-2427.2012.01175.x.
- Löw, M., Goodwin, D., 2016. The Sociology of Space: Materiality, Social Structures, and Action, Cultural Sociology. Palgrave Macmillan, New York.
- Madden, R., 2017. Being Ethnographic: A Guide to the Theory and Practice of Ethnography. Sage, London.
- Marmot, M., Goldblatt, P., Allen, J., et al., 2010. Fair Society, Healthy Lives (The Marmot Review) WHO
- Olesen, B.R., Nordentoft, H.M., 2013. International journal of action research. Walk. Talk Micro-Sociol. Approach Co-Prod. Knowl. Power Action Res. 67–94.
- O'Mara-Eves, A., Brunton, G., Oliver, S., Kavanagh, J., Jamal, F., Thomas, J., 2015. The effectiveness of community engagement in public health interventions for disadvantaged groups: a meta-analysis. BMC Publ. Health 15, 129. https://doi.org/10.1186/s12889-015-1352-y.
- Palys, T., 2008. Purposive sampling. In: The Sage Encyclopedia of Qualitative Research Methods. Sage, Los Angeles, pp. 697–698.
- Pestoff, V., 2006. Citizens and co-production of welfare services: childcare in eight European countries. Publ. Manag. Rev. 8, 503–519. https://doi.org/10.1080/ 14719030601022882.
- Reason, P., Bradbury, H., 2001. Introduction. In: Handbook of Action Research Participative Inquiry and Practice. Sage.

- South, J., 2014. Health promotion by communities and in communities: current issues for research and practice. Scand. J. Publ. Health 42, 82–87. https://doi.org/10.1177/1403494814545341.
- Spradley, J., 1980. Participant Observation, first ed. Holt, Rinehart and Winston. Timmermans, S., Tavory, I., 2022. Data Analysis in Qualitative Research: Theorizing with Abductive Analysis. The University of Chicago Press.
- Toft, U., Bloch, P., Reinbach, H., Winkler, L., Buch-Andersen, T., Aagaard-Hansen, J., Mikkelsen, B., Jensen, B., Glümer, C., 2018. Project SoL—a community-based, multi-component health promotion intervention to improve eating habits and physical activity among Danish families with young children. Part 1: intervention development and implementation. Int. J. Environ. Res. Publ. Health 15, 1097. https://doi.org/10.3390/ijerph15061097.
- Tørslev, MK, Andersen, PT, Nielsen, AV, Petri, M, Termansen, T, Vardinghus-Nielsen, H, Varming, A, Bloch, P., 2021 Sep 27. Tingbjerg Changing Diabetes: a protocol for a long-term Supersetting initiative to promote health and prevent type 2 diabetes among people living in an ethnically and socioeconomically diverse neighbourhood in Copenhagen. Denmark. BMJ Open. 11 (9), e048846. https://doi.org/10.1136/bmjopen-2021-048846. PMID: 34580094; PMCID: PMC8477325.
- Tortzen, A., Annika, Agger, 2015. Forskningsreview om Samskabelse, 33. University College, Lillebælt.
- Vanleene, D., Voets, J., Verschuere, B., 2017. Co-producing a nicer neighbourhood: why do people participate in local community development projects? Lex Localis 15, 111–132. https://doi.org/10.4335/15.1.111-132, 2017.
- Vella, S.A., Swann, C., Batterham, M., Boydell, K.M., Eckermann, S., Fogarty, A., Hurley, D., Liddle, S.K., Lonsdale, C., Miller, A., Noetel, M., Okely, A.D., Sanders, T., Telenta, J., Deane, F.P., 2018. Ahead of the game protocol: a multi-component, community sport-based program targeting prevention, promotion and early intervention for mental health among adolescent males. BMC Publ. Health 18, 390. https://doi.org/10.1186/s12889-018-5319-7.

#### Web links:

Tingbjerg changing diabetes official website. www.tingbjergchangingdiabetes.dk.