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Ethnic identity, social capital and health inequalities : factors shaping African-Caribbean participation in local community networks

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Ethnic identities, social capital and health inequalities:

Factors shaping African-Caribbean participation in local community networks.

Abstract

This paper examines the impact of ethnic identity on the likelihood of peoples' participation in local community networks, in the context of recent policy emphasis on the participation of marginalised communities in such networks as a means of reducing health inequalities. Conceptually, the paper is located against the background of debates about possible links between health and social capital - defined in terms of grassroots participation in local community networks - and an interest in the way in which social exclusion impacts on social capital. The paper draws on lengthy semi-structured, open-ended interviews with 25 African-Caribbean residents of a deprived multi-ethnic area of a south England town. While African-Caribbean identity played a central role in peoples' participation in inter-personal networks, this inter-personal solidarity did not serve to unite people at the local community level beyond particular face-to-face networks. Levels of participation in voluntary organisations and community activist networks were low. Informants regarded this lack of African-Caribbean unity within the local community as a problem, saying that it placed African-Caribbean people at a distinct disadvantage – furthering their social exclusion through limiting their access to various local community resources. The paper examines the way in which the construction of ethnic identities - within a context of institutionalised racism at both the material and symbolic levels - makes it unlikely that people will view local community organisations or networks as representative of their interests or needs, or be motivated to participate in them. Our findings highlight the limitations of policies which simply call for increased community participation by socially excluded groups, in the absence of specific measures to address the obstacles that stand in the way of such participation.

Keywords: social capital, social exclusion, health inequalities, ethnic identity, African-Caribbean, participation, voluntary organisations, health policy.

1. Introduction

This paper examines the impact of ethnic identities on the likelihood of peoples' participation in local community networks, drawing on interviews with African-Caribbean residents of a small town in south England. From a conceptual viewpoint, this work is located against the background of current debates about possible links between health and social capital, defining social capital in terms of citizen participation or 'civic engagement' in local community networks. Much work remains to be done in exploring the way in which various forms of social exclusion – including minority ethnic status – impact on social capital, and our research seeks to contribute to such understandings. From a policy viewpoint, our research is located within the context of recent policy emphasis on the participation of marginalised communities in a range of community-level initiatives as a means of reducing health inequalities (Acheson 1998, Department of Health 1999a; 1999b, Social Exclusion Unit, 2000). This emphasis on grassroots community participation in English health policy is consistent with various internationally subscribed declarations spearheaded by the World Health Organisation, including the Alma Ata declaration (1978), the Ottawa Charter (1986) and the Jakarta Declaration (1997).

Three forms of participation are said to be relevant to health promotion. *Firstly*, the participation of grassroots community representatives in decisions regarding the design and delivery of health services. This is said to be vital for addressing issues such as the differential access, cultural differences, racism and communication difficulties which undermine the level of health service provision received by members of socially excluded groups (Department of Health, 1999a). The Social Exclusion Unit (2000) has placed particular emphasis on the importance of working with local minority ethnic community groups, voluntary groups and faith organisations as a means of accessing minority ethnic people to participate in such "partnerships" between government and local communities to address such inequalities. *Secondly* it is argued that local people should participate in health promotion projects designed to promote healthy behaviours (such as exercise, condom use and the appropriate accessing of health services). The community development approach

within health promotion suggests that people are far more likely to change their behaviour if they see that liked and trusted peers are changing theirs (Beeker *et al.*, 1998). *Finally*, and more indirectly, there is a growing recognition of the influence of local neighbourhood conditions on health, with a range of research studies suggesting that participation in local community networks has a positive impact on health (Yen and Syme, 1999; Israel *et al.*, 1994). Within this context, policy documents place heavy emphasis on the potential benefits of strengthening marginalised communities, through building social capital in socially excluded communities, as a means for reducing health inequalities (Dept. of Health, 1999b, Social Exclusion Unit, 2000). In short, there is wide consensus that in relation to health inequalities "real change can come only from the local community itself by harnessing the energy, skills and commitment of local people", accessed through local community groupings, local businesses and voluntary bodies (Dept. Health, 1999b, section 10.22).

It is against this background that this paper seeks to highlight a range of obstacles that stand in the way of the participation of black and minority ethnic people in community-level networks and initiatives. We do this in support of our argument that policies which fail to take account of these obstacles are likely to have less than optimal impact in reducing health inequalities.

Ethnicity and health inequalities

In England, members of particular black and minority ethnic (BME) groups (in particular the Pakistani, Bangladeshi and African-Caribbean groups) suffer the poorest health (Nazroo, 1997). These groups are also the most socio-economically disadvantaged, and there is no doubt that material factors make the most important contribution to differences in health between different ethnic groups (Nazroo, 1998). However, it has been argued that the variables of material deprivation and minority ethnic status cannot simply be collapsed into one another in explaining ethnic health inequalities, and that there might be additional factors – specific to minority ethnic status – that impact on the poor health experienced by some BME groups. Various writers in this area have called for greater attention to be paid to ethnic identity and culture, non-economic forms of racial discrimination, and the nature of BME peoples' participation in family and community networks which promote health and welfare

(Nazroo, 1998; Smaje, 1996; Williams *et al.*, 1997). On a methodological note, Ahmad (1995) has highlighted the importance of qualitative research in exploring these issues.

This paper is located within the spirit of these calls, and in the context of current interest in participation as a health promotion strategy. It reports on a qualitative research study which seeks to examine the way in which such participation is enabled or constrained by the construction of ethnic identity within the context of the 'institutional racism' which characterises British society (MacPherson 1999). In recent years this concept has received much attention, with evidence that the social disadvantages facing visible ethnic minorities are institutionalised both at the material level (with particular BME groups experiencing disproportionately high levels of economic deprivation) and at the symbolic level (at the level of perceived respect and recognition). In this paper we seek to highlight the way in which this context shapes identity construction in ways that undermine the likelihood of the allegedly health-enhancing community participation advocated by policy makers.

Health and social capital?

Much interest is currently being devoted to the hypothesis that people might be healthier in communities characterised by high levels of social capital. While the concept of social capital has been defined by a number of theorists (Portes 1998), it is Putnam's definition that has captured the most attention in the health field. Putnam (1993) defined social capital in terms of both networks (high levels of participation in local community groupings) and norms (high levels of trust and reciprocity amongst community members). More recently however, Putnam (1999) has argued that the 'network' concept of associational membership is a more powerful marker of social capital than the 'norm' dimensions of trust and reciprocity (see also Foley and Edwards, 1999). Against this background, our own research focuses specifically on the network dimensions of social capital, defining social capital in terms of participation or 'civic engagement' in local community networks.

To date, much of the discussion about links between health and social capital has taken place at the level of hypothesis. While the work of Kawachi and colleagues pointed to strong links between social capital and health (Kawachi *et al.*, 1997; Kawachi and Kennedy, 1999), several subsequent epidemiological studies have yielded weaker correlations (e.g. Veenstra

and Lomas, 1999; Cooper et al. 1999, 2000). To date, the empirical evidence for a healthsocial capital link is so weak that many have seriously questioned the value of the concept within health research (Hawe and Shiell, 2000). We argue that at this early stage of conceptual development, attempts to convert this vague concept into a hard-nosed epidemiological variable might be premature. Epidemiological studies have tended to start from an unrealistic expectation that Putnam's concept of social capital, developed within the context of economics and political science in Italy and the United States, can simply be imported wholesale into the field of health, and unproblematically applied in other countries and contexts. Epidemiological research in this field is often based on retrospectively constructed items from already existing survey studies (e.g. Campbell and Williams, 2000; Cooper et al., 1999, 2000; Veenstra and Lomas, 1999). Studies of this nature frequently draw on survey items which superficially match Putnam's 'laundry list' of networks and norms in the absence of pilot research regarding the applicability of these listed variables to other countries and contexts (see Blaxter's, 2000, account of various measures of social capital). We argue that much more research needs to be done into the forms taken by social capital in various contexts, and into the mechanisms underlying the link between social capital and health, before we can successfully operationalise the concept as a quantitative survey variable.

In a micro-qualitative study investigating the suitability of Putnam's (1993) concept of social capital as a tool for conceptualising local community life in England, Campbell, Wood and Kelly (1999) argue that while social capital provides a useful starting point, much work remains to be done in tailoring it to apply to local conditions. In particular they point to an urgent need to examine the way in which forms of social exclusion such as poverty and ethnicity shape and constrain the existence of social capital. It was in pursuit of this recommendation that the current research project was established – with the aim of examining variations in the way in which members of different ethnic groups create, sustain and access social capital in a less affluent multi-ethnic deprived area in England.

Some writers have sought to polarise social capital and poverty as competing explanations of health inequalities, rather than seeing them as complementary. Unsurprisingly, a range of epidemiological studies have found that material living conditions and socio-economic position are stronger predictors of adverse health than various indicators of social capital (e.g.

Cooper et al., 1999). Radical critics of the concept have used such findings as an attempt to discredit it, arguing that the current emphasis on social capital is part of a political agenda to mask the effects of poverty on ill-health and to justify reduced welfare spending (Muntaner and Lynch 1999, Labonte 1999). In contrast to such polarisation of social capital and poverty as competing explanations for health inequalities, Gillies, Tolley and Wostenholme (1996) emphasise their complementarity. They argue that the primary cause of health inequalities is poverty, and that the economic regeneration of deprived communities is essential for reducing such inequalities. However, they qualify this claim with their argument that since one of the effects of poverty is to undermine community networks and relationships, economic regeneration must be accompanied by social regeneration (i.e. projects to enhance social capital) if they are to have optimal success in improving health. Along these lines, others argue that a focus on social capital could contribute to much-needed research into the mediating mechanisms whereby various forms of material and symbolic social exclusion impact on health (Baum, 2000). The work of Bourdieu (1986), with his emphasis on the role played by different forms of capital in the reproduction of social inequalities is often cited as a potentially useful starting point for a critical conceptualisation of social capital.

It is Bourdieu's conceptualisation of the role played by social capital in reproducing or transforming social inequalities that forms the basis of our research. We use the concepts of social capital and social identity as conceptual tools in the interests of developing what we have elsewhere referred to as a "social psychology of participation" (Campbell and Jovchelovitch, 2000). In this task we are informed by Leonard's (1984) critical conceptualisation of identity construction. According to Leonard, identities are constructed and reconstructed within a range of material and symbolic constraints which often place limits on the extent to which people are able to construct images of themselves and their claimed group memberships that fully reflect their potentialities and interests. However, at particular historical moments, often through participation in collective projects and networks, members of socially excluded groupings may indeed come together to construct identities that challenge their marginalised status. In some circumstances, participation may take the form of participation in networks of collective action which serve either directly or indirectly to improve peoples' material life circumstances, or raise the levels of social recognition they receive from other groups. Within such a context, social identities and participation have the potential to serve as important mechanisms for social change. However, a number of research studies have shown that participation in local networks is most likely to take place amongst the most wealthy and the most educated members of a community (Baum *et al.*, 2000). As such, it could be argued that measures to increase local community participation could have the unintended consequence of increasing social inequalities rather than reducing them. For this reason we will argue that it is vitally important that policies that advocate participation as a means of addressing social inequalities should not be blind to obstacles to such participation by socially excluded groups.

2. Methodology: social capital in a multi-ethnic community

In this paper we report on findings drawn from a larger study of social capital in a multiethnic community in the two most economically deprived wards of a south-east English town. These wards, which are geographically adjacent, have the highest percentage of black and minority ethnic group residents in the town. In the light of the controversies surrounding the notion of community, we must specify at the outset that we defined 'community' in geographical terms, focusing on two adjacent wards (administrative districts) in our town of interest. This was in line with local health authority policies in our area of interest that target most of their efforts at reducing health inequalities health-inequalities-related efforts and resources at geographically defined localities. In our interviews it emerged that nearly all of our informants expressed some level of identification with the local area, so there was a degree of overlap between geographically and psychologically defined communities in our area of interest. In these two wards, of their total of 20 000 inhabitants, about 45% are white, 5% African-Caribbean and 50% South Asian. Semi-structured, open-ended interviews were conducted with a total of 75 people, 25 of whom identify themselves as African-Caribbean, Pakistani Kashmiri and White English respectively. Elsewhere, we have provided a comparative overview of interviews with each group (Campbell and McLean, 2001a), as well as a detailed report on our Pakistani findings (Campbell and McLean, 2001b). In this paper we report on the interviews with 25 African-Caribbean residents.

According to the 1991 Census about 6% of the English population consist of visible ethnic minorities, and of these, around one fifth describe themselves as African-Caribbean (Coleman and Salt, 1996). A large number of African-Caribbean people were recruited from the Caribbean islands in the 50s and 60s, coming to England to work in public sector contexts

such as transport and health and as greatly needed unskilled labour within the private sector. The latter include many within our town of interest who came to work in its large manufacturing sector. All our informants identified with the label 'African-Caribbean', and often used this term interchangeably with the label 'Black'. Within the over-arching 'African-Caribbean' label, some people also referred to themselves in terms of more specific labels such as 'Barbadian', 'Jamaican' or "West Indian'

We used a purposive convenience sampling technique in order to recruit 25 African-Caribbean people. Our informants were spread across both genders and across the 15-75 age group, with half living in households with at least one person employed and half not, and half involved in at least one local community organisation, with the other half not. The recruiting of research participants raised a series of complex issues which are discussed in detail elsewhere (McLean and Campbell, 2001). Most of our informants were recruited through the help of key contacts in local community voluntary groupings representing the African-Caribbean community. The process of recruiting informants was a lengthy one. The second author, a university-based researcher of African-Caribbean background, visited a range of organisations and institutions over a six-month time period, outlining the aims of the research, and generating discussion about how to find participants. These organisations included black awareness and history groupings, Saturday schools, youth clubs, elderly centres, voluntary African-Caribbean development organisations, and statutory sector groupings with responsibilities to African-Caribbean people. Where possible, key members of these groupings helped the researcher identify individuals who met the eligibility criteria outlined above (age, organisational membership and so on), and introduced him to such people. Members of these groupings were enthusiastic about the research, commenting that there had been too little of an African-Caribbean focus in previous research in the town, and only one person identified in this way refused to participate. Other informants volunteered to participate in response to the researcher's invitation. This invitation was issued at a series of talks he gave at churches, schools and informal African-Caribbean social events, as well as at meetings of African-Caribbean specific community activities organised by local voluntary or statutory groupings. Eliciting volunteers, and arranging interviews at times that suited them, was a lengthy process, often requiring the researcher to be available to attend events and conduct interviews over weekends and in the evenings. Without this flexibility, and without

the close familiarity that the researcher developed with the community over a year-long period, recruitment would have been an even more difficult process.

Some informants expressed cynicism about the value of research, commenting that previous research exercises directed at African-Caribbean people had not yielded perceivable benefits. Within this context, the researcher continually emphasised that the project was not action research, but retained a primarily academic focus, with the findings feeding into a long-term body of knowledge about how best to promote partnerships and participation involving minority ethnic communities. In the context of a historical experience of misrepresentation or lack of attention by outsiders, the African-Caribbean people we approached were particularly appreciative that the researcher was himself of African-Caribbean background. We believe that his ethnicity served as a key determinant of people's willingness to participate in the research and of the quality of the data produced in the interviews, and especially informants' readiness to reflect critically on the strengths and weaknesses of the African-Caribbean community. In our view a non-African-Caribbean interviewer would have battled to recruit informants, and would not have been able to produce the rich interview transcripts that we obtained.

Each interview lasted for three hours, with one hour for detailed life histories, one hour for open-ended conversation about local community life, and one hour of detailed discussion of a social capital questionnaire drawn from an earlier study (see Campbell, Wood and Kelly, 1999 for the interview topic guide). Interviews were analysed using NU*DIST. As we have said, the study was informed by our particular focus on the 'network' dimension of social capital, conceptualising it in terms of peoples' participation in local community networks. We classified our findings under three broad network types: informal networks of family and friends; local voluntary organisations linked to leisure, hobbies or personal development; and local community activist groups.

Researchers in the field of ethnicity are often accused of perpetuating inaccurate stereotypes of groups that ignore their internal diversity, and contribute to the 'othering' of minority group members (Brah, 1996; Hall, 1997; Modood *et al.*, 1994). In this regard we seek to emphasise that our paper looks at the construction of African-Caribbean identity by one small group of residents of one particular multi-ethnic area. It is not our goal to make substantive

comments about some generalisable or essential 'African-Caribbean identity'. Rather, our intention is to present a case study of a particular group of people in one particular local space. We do so in order to illustrate some of the ways in which ethnic identities may sometimes be constructed, within a context of institutionalised racism, in ways that constrain the types of community participation outlined in health inequalities policies. The extent to which the experiences of our informants would generalise to other African-Caribbean people in other contexts is a matter for empirical investigation.

3. Ethnic identity and local networks

African-Caribbean identity played a central role in peoples' accounts of their participation in inter-personal networks at the level of family and friends. However, this strong sense of interpersonal solidarity did not serve to unite African-Caribbean people at the local community level beyond particular face-to-face networks. People spoke of what they described as a problematic lack of African-Caribbean unity in the our local community and town of interest, which they said placed African-Caribbean people at a distinct disadvantage – furthering their social exclusion through limiting their access to various local community resources.

Inter-personal networks: family and friends

Peoples' main support networks were almost always composed of African-Caribbean people, and African-Caribbean identity was a source of pride and personal empowerment in the interpersonal sphere. People felt enriched by their association – however indirect in the case of second generation people – with the Caribbean islands, described as beautiful and warm, both in terms of the physical climate, and in terms of social norms. Despite qualifications that life there was often materially hard, the islands served as a powerful symbol of relaxed and positive community spirit, which people often referred to in giving an account of their lives and relationships. People spoke of the warm inclusiveness of island life, and of the "passion and creativity" of African-Caribbean people (F5-35¹), their easy and relaxed inter-

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¹ Informants are numbered according to their gender (M or F), followed by their interview number, with their age following after the hyphen. Thus F5-35 is informant number 5, a 35-year-old female.

connectedness and their love of children and old people, which they contrasted strongly with White English people. Family relationships were highly valued, and close family ties were cited as a key tenet of African-Caribbean identity by informants.

Being African-Caribbean means a certain pride in where we come from, and a certain pride in what we're good at, really, which is probably family and the way we raise our children. (F4-32)

This came out particularly strongly in peoples' comparisons of the African-Caribbean and white communities in the area. People pointed to sharp contrasts between African-Caribbean and white English family relationships. They perceived their own families as stronger and with higher levels of "closeness, loyalty and support" (F3-30). One element of this was an ethic of respect and care for older people. Thus, for example, younger people spoke wonderingly of visits to the homes of white friends, where young people often treated their parents in a disrespectful or imperious way ('I want this, and I want that'), or would go straight to their rooms on returning home, without greeting their parents. People also characterised African-Caribbean people as having greater respect for older people than their white counterparts.²

People said that African-Caribbean people had more regular contact with their families after they had left home, they were less likely to put their old people in homes. In short, there was far more solidarity between African-Caribbean family members.

Family is not as strong in the white community. Have you ever seen like on TV, like a white funeral. There's like no one there. There's only about ten people there. And you're thinking, "Hold on. What happened to all your uncles and your cousins and your nieces and your nephews. Surely, what happens to these people, man?" (M6-28)

People relied overwhelmingly on other family members for all forms of social support. However, while older people spoke of a wide network of relatives they could draw on for assistance, this was not the case with younger people who often came from smaller families, with less close ties than had been the case with the older generation. In cases where family relationships had broken down, young people were often completely at sea — with no perceived alternative sources of support, and not always sure how to access support from

² Stereotypes of white and Asian people played a central role in the accounts people gave of their African-Caribbean identities. Elsewhere (Campbell and McLean, 2001a) we provide a detailed discussion of the role of the stereotypical ethnic "other" in the construction of ethnic identities in our multi-ethnic community of interest.

social services. In our sample, two young men spoke of how they had struggled to cope without family support when their family relationships had broken down – in one case due to illness, and in the other due to family conflict. Several people cited isolation as one of the causes of what people regarded as unduly high levels of mental illness amongst young men in the community.

People also spoke of the pressures facing one-parent families. One 16-year-old man in our sample had taken on the role of father-figure to his younger siblings in the absence of his father, and provided much emotional support to his single mother. While he spoke of having taken on these tasks willingly and uncomplainingly, at another stage of the interview he cited the stress and demands of these family responsibilities as one of the reasons why he had neglected his studies and dropped out of school.

After family, friends were second in line. People spoke of strong friendship networks amongst African-Caribbean people as well as their high levels of tolerance and respect for other ethnic groups. People frequently referred to good friendships with white people, particularly young men (friendships with Asian people were less common.) However in all cases, African-Caribbean people were cited as the friends people would turn to if they were in trouble. Close and supportive friendships were cited as a key tenet of African-Caribbean identity. Friendships with other African-Caribbean people were often based on a sense of common experiences of exclusion.

There's that empathy, that sharing. I mean, we're walking down the street in the night, people will cross the road because they see us, we're both going to share that. They're both going to think that we're going to get mugged because we're big, powerful looking guys. You know, so we will share empathy. That's why we congregate in our own groups. It's something which is unwritten and unseen but it binds us all together. (M7-29)

Given the geographical dispersal of African-Caribbean people in England, these interpersonal family and friendship support networks and loyalties often tended not to be located in the immediate neighbourhood, with people often having to make great efforts to link up with African-Caribbean friends living in other towns. One woman spoke of a group of black professional women who went to great lengths to keep in touch, despite living over a large geographical area.

Yes, for me that has always been very important knowing there are other people from the same background, a security thing. I'm not bothered if it's African or Caribbean. And we try and meet like every month, there's a group of us. Black professional women that have met working together over the years in London. (F6-35)

(She regretted that these close and valued work friends were usually dispersed over a wide geographical area, and were thus not available to serve as a practical and moral support system in relation to home issues and child care.)

Neighbours

In our community of interest, numbers of African-Caribbean people were low relative to other ethnic groups, with people tending to have Asian or white neighbours. People spoke of high levels of inter-ethnic tolerance amongst neighbours ("This place works well as an integrated community: blacks, Asians and whites." F3-30). While people tended to have close links with African-Caribbean neighbours when they had them, contacts with neighbours were generally limited to polite greetings in the street or over the fence. Beyond this, people placed much emphasis on "keeping a distance" (F6-35) or "not troubling one another".

There's a few white people that lives around here that is very nice to me. I give her a good smile and say hello back. You don't push yourself onto them but say hello, they're still your friends, you know. But not that close, just from a distance. Hello, how are you, just happy to have a chat. Whether deep down, they like you or not, I don't know. (F7-68)

To digress briefly, the italicised part of this quote hints at the scars carried, particularly by older African-Caribbean people, of the blatant racism that many of them encountered when they first arrived in England. While people did not dwell on this in the interviews, it emerged in various indirect ways. Thus for example, older people referred to the difficulties of finding rented accommodation in a context where landlords often had signs outside their houses saying "No blacks, no dogs and no Irish." (M9-61). One particularly community-minded older man said that he would feel awkward about helping a white woman who had fallen in the street, due to his perception of taboos around physical contact between white women and black men. While many of our informants said that there was currently less racism than there had been in the past, it lurked as an ever-present possibility even in the most civil interactions with other white community members.

Local voluntary organisations

The concept of social capital lays great emphasis on peoples' participation in local community life – referring to their interactions with neighbours, as well as involvement in voluntary associations linked to leisure, hobbies or personal development. There was virtually no reference to these in our interviews. The exception here was young men (under 20s), who spoke positively of a series of local sports clubs and youth clubs, which have had some success in mobilising young people. People often commented on the wasted possibilities of church as a forum for unifying African-Caribbean people, speaking of the strong role it had played in creating a sense of community amongst older people when they had first arrived in England in the 60s and 70s. People regretted that these days the church had little relevance for many younger African-Caribbean people. They commented that while in their view religion served to bind Jewish, Irish or Asian people, this was not the case with the black churches in the area (small groups meeting in garages or houses, larger pentecostal-type churches, and more mainstream English churches attended by some African-Caribbean people). Several informants said that this lack of unity wasted an opportunity for a key umbrella that might have united African-Caribbean people.

Community activist networks

Numerous opportunities existed for African-Caribbean people to become involved in a range of formal community consultation exercises and activist networks, ranging from the provision of facilities for children, young people and old people, women's issues, health issues, neighbourhood safety, policing and leisure and entertainment facilities. However, involvement in such networks was low, as was peoples' interest in more informal activist networks such as neighbourhood petitions regarding smells from a local factory or traffic calming, which generally generated little local support. Some of our informants spoke of trying to mobilise local African-Caribbean people around local community issues, including cross-ethnic ones (e.g. Neighbourhood Watch) and ethnically specific ones (e.g. efforts to get an African-Caribbean community centre, or to encourage increased African-Caribbean membership of the local Labour party). They spoke of the impossibility of 'getting people involved'. Apart from a small core of key African-Caribbean activists who came again and

again to one initiative after another, attempts to broaden African-Caribbean participation often met with disappointment and frustration.

I've made a conscious decision that next year I probably won't bother attending any local community meetings. Because I've reached the point where I think they are a definite waste of time...Because mainly, ah, usually, I'm the only Black woman there, at these meetings...yet these meetings are open to a whole community. They are even advertised in the free newspapers, but no one comes. (F5-35)

People of all ages saw this lack of community mobilisation as a definite loss. When asked why levels of community participation were low, people gave a range of answers. Some of the answers were not related specifically to ethnicity. These included lack of time, lack of child-care, lack of faith in the interest or ability of politicians to represent the interests of the constituents that elected them, a lack of identification with the local community centre as a meeting place, and neutrality or satisfaction with local services and facilities. Similar factors emerged as reasons for non-participation in an earlier study of white residents of a similar town in south England (see Campbell, Wood and Kelly, 1999). These fall beyond the scope of this paper, however, which aims to focus specifically on the way in which African-Caribbean identity shaped the likelihood of community participation (in the light of health inequalities policies which advocate ethnic-specific community mobilisation). In relation to ethnicity, people characterised the African-Caribbean community in terms of a combination of apathy, individualism and lack of confidence.

I think black people, we don't do much for ourselves Not a lot of people get together and do something good for ourselves. That's the reason things go downhill. (F7-68)

Yea, we sit down and cuss in our houses, don't we? We sit down and moan and moan, but we don't actually get up and say 'yeah'. (M6-28)

I don't know if there is the confidence amongst black people to actually take that step, to feel that they may be able to address issues. (F4-32)

Some spoke of the "pride" of African-Caribbean people, which often drove them to struggle alone with problems, rather than sharing them with others, which might have formed the starting point for group mobilisation around common problems.

It comes back to being so proud, as well, and I love that about Jamaicans, we are so proud. But sometimes we're so proud, that we make a rod for our own backs. We won't say, well, yeah, maybe I do need some help. (F4-32)

4. Obstacles to community participation

There was much evidence that despite its positive role in peoples' interpersonal networks, African-Caribbean identity often served as a source of social exclusion in other spheres of life. Such experiences of exclusion were unlikely to encourage people to view themselves as welcomed or empowered members of an inclusive local community beyond the sphere of their inter-personal links.

Experiences of social exclusion at school and at work

Interviews were full of anecdotes about experiences in the school and the workplace. It was here, where they were almost always in the numerical minority, that African-Caribbean people had experienced their most negative experiences of marginalisation. Thus for example, one woman spoke of the isolation she had felt at school – growing up with strict African-Caribbean parents with a "different culture". Her parents' refusal to allow her to wear trousers or pierce her ears, as well her plaited hairstyle with clips and bows, had made her feel like an outsider growing up outside the norms of a predominantly white community. One young man spoke of his relief when, aged six, a second little African-Caribbean boy was brought to his class at school, kicking and screaming that he wanted to go home. Their close friendship had grown out of their sense of mutual exclusion. Another woman spoke of being told to bring sugar to school for a cookery class. Her mother had given her brown sugar, rather than white sugar as the other mothers had done, and she spoke of the humiliation she had felt when her cake had turned out brown instead of white. Another woman said how isolated she had felt at her first college where there had been very few black people, and of her sense of relief and pleasure when she arrived at her second college to find a greater number of African-Caribbean fellow students.

People spoke of the way in which minority ethnic children often internalised a sense of being 'other' as visible ethnic minorities in a white society -- in ways that had been damaging to themselves and their families.

My best friend at school, she was mixed race, but she wanted to be blonde and like all the other girls, who were just normal in her eyes. It took adulthood for us to realise that we were just as valuable. It was a big deal for her. It's only now that she has contacted her father because she hated him for the misery she felt that he put her through, because he was Pakistani and why

couldn't he have been white or Scottish or whatever, and he was Pakistani, and it was hard for her to swallow. (F4-32)

Older informants had worked in relatively unskilled occupations, often for long hours in hard jobs, but spoke of them positively. Positive attitudes to work were also held by some of the younger women in our sample, who had risen up to good managerial posts in various contexts. They referred to their work with a strong sense of purpose, and looked ahead towards a challenging and positive career path. However, they emphasised how ethnically isolated they often felt in the workplace. Thus for example one woman said she was the only African-Caribbean person in a team of 120 managers at work.

The young men in our sample were negative about work, which was not experienced as a source of dignity or of confidence. They had higher expectations of the job market than the older generation, and expressed regret and bitterness at the limited opportunities for rewarding employment for young men. One young man expressed his wish to break out of the labouring class his father had been part of, motivated by his own desire to provide his son with a role model he could be proud of.

Cause my Dad's a welder in a factory. I'm not knocking it. But I don't want to just be like a factory hand because that was what our people came to do in the '60s, when we were invited over. I want to take it further. I've got to do it, for my son, so that he can look up to me when he comes a man and say, well, you know what I mean, "I'll try and take it further than you Dad". (M7-29)

However, he referred to the way in which ethnicity and social class combined to make it very difficult for young black men to find work.

(This ward) is one of the most unemployed areas in the town. So that means that our culture, a place where there's predominantly ethnic people just happens to be the most unemployed area. So, as usual, ethnic people ain't getting work, they're not getting no money. And it's a sad situation. You know, I mean, we have to uplift ourselves which we're trying to do, but the powers that be ain't making it easy for us. There's a lot more that could be done, there's a lot more, you know, there's a lot more, there's so much more. (M7-29)

Available jobs were menial and unfulfilling, with work being seen as a source of low selfesteem rather than the pride and actualisation that young men hoped for. Gender, social class and ethnicity intertwined in the account one young man gave of his work experience.

At the end you are on the lowest rung, because you are black and you are unskilled. You're the lowest rung of the lowest. You know, and they're prepared to treat you – you know I came late a couple of times and the man would say: 'If you're late again, you're going.' There's no love between you. You get a feeling you can be replaced easily. So how can you feel confident there? You go to

work to be a man, yet still at work they're treating you like a boy, like a child, just belittling you. And a lot of people just take this crap. (M8-32)

While young men were more likely to dwell on structural obstacles to their progress, young women tended to use more psychological language, often focusing on what they called the 'lack of confidence' of their black counterparts. Thus, for example, one particularly successful young woman had the following to say:

We're all feisty, so why can't we say to ourselves and one another – I'm a black man, I'm a black woman, living in this country, living in (this town), living in (this ward), and I'm going to make something of my life. I can do it because I've got the brain. And I've particularly guys – men who are black who have lived in this town all their lives with the brains on them that they could be such entrepreneurs. They could really make something of their lives, but they say, but I'm not going to because I'm black. If I was stood on a podium, I would tell say: "If you think you can't do it, you won't do it, but if you think you can, you will." It's nothing to do with the colour of your skin. (F4-32)

In summary, peoples' experiences both at school and in the workplace, pointed to numerous direct and indirect ways in which the construction of identity – both within the context of ethnic minority status and material deprivation – occurred in a context where people were often made to feel like outsiders.

Representations of the Asian community

Above we have sought to highlight how, constructed within the context of layers of symbolic and material exclusion, African-Caribbean identity was not regarded as a strong political resource by most people. This was strongly articulated through the comparisons that people made between the African-Caribbean and the Asian communities. Representations of 'the other' play a key role in shaping peoples' social identities (Hall, 1996), and our informants had constructed a strong stereotype of what they referred to as "the Asian community". Here people nearly always referred to South Asian people in England as a homogenous group, making no distinction between different sub-groups (e.g Pakistani and Bangladeshi; Hindu and Muslim). Particular emphasis was placed on what people described as the relative solidarity of the Asian community, as well as their superior business and political skills. This section examines the way in which such stereotypical representations of the Asian community served as a rhetorical device in peoples' accounts of their own ethnic identity within this particular local community.

Powerful and strong, yeah. That's how the Asian people get their place (community hall) down the road because they went and they volunteer to do things and they put in their petitions and they said they wanted places for their people to come and sit down and chat and they get it. (F7-68).

People frequently spoke of a culture of *solidarity* that existed amongst Asian people. By contrast they believed that African-Caribbean people lacked the cohesive and group-minded nature of their Pakistani Kashmiri counterparts on a number of levels. One informant who had owned a small shop talked about how while Asian people made a point of supporting Asian shops, this was not the case in the African-Caribbean community, who simply shopped where it was convenient no matter what the ethnicity of the owner.

Several people spoke of how Asian people invariably came to one anothers' support if there was an argument in the street for example.

My uncle, he went to sit down on the train in London and some white man started having a go at him for sitting down in the chair when he wanted to sit down, something like that. There was black people on the train but none of them would help him. They just mind their own business. And he goes, but if that had been an Asian man, at least he would have had someone giving him some support. (M3-16)

The Asian community, it is strong and it is closed. If a policeman go there and stop an Asian person for anything, you ever see how many Asian people crowd them? The police have to leave because they all crowd them. If a policeman stops a black boy, all of the black on the street say: "Hmm, it's not my business." You won't find an Asian do that. That's the difference: unity. We have to learn to unite and I think that's where they have it over us. (F8-70)

At the political level, Asian people were seen to have vastly superior mobilising skills, and to be better organised and assertive in protecting their group rights. By contrast, African-Caribbean people were described as having no political voice at all, or else as having inadequately vocal representatives.

The ACs, they don't speak up, they need to be stronger – the Asian community, they have their champions – Have you ever heard Ben Abbott speaking up for black people? Do you ever hear Harry Boateng speaking up for black people? No! The black voice is not heard' (M9-61)

Several people spoke admiringly of how the Asians had organised against a local bingo hall, originally called 'Mecca', forcing the owners to change the name.

I think a lot of white people are scared of the strength of the Muslim man...... the Mecca thing was the pinnacle. The Mecca's been doing their bingo business in England for god knows, nearly 100 years. Its always been Mecca, always will be Mecca. How come its changing? Just to suit these people. And the white people they can't believe it. They're thinking: "This is England, man,

no. What's going on?" And that Mecca victory kind of set the precedent for what has gone on since. (M6-28)

This informant compared this united Asian response to the complete lack of support he and his brother had elicited when they tried to mount an informal campaign against a local shop selling golliwogs.

Asian people were also perceived to be *more successful in business and politics*. They were described as having superior business skills, which meant that they had a strong economic power base in the local community. Asian people were described as occupying a wide range of strategically important jobs. These included jobs in businesses (in their own small local businesses and in larger national concerns such as banks), in the professions (teaching, law, medicine and so on) and in local government (particularly the local council).

If you go to every school in this town, there's two or three Asian teachers young black boys don't want to take up teaching A lot of Asians work in the town hall. There's more Asians now than white, I think. Every department, you get two or three Asians. If you go down the town now, I bet you, you walk into any bank, and you're going to see two or three. You may see half a black, if you're lucky. They got the same qualifications but he don't apply for the jobs. (M11-65)

These professionals served as role models for young Asian people. They also created a network of ethnic-based contacts, on which Asian people could draw when they needed expert help or advice. One older African-Caribbean man spoke of the lack of prominent role models for young black people, compared to young Asian people, who were surrounded by Asian role models. Not only did these well-placed professionals serve as role models for young Asians. They also gave Asian people a range of contacts in the social spheres within which power operated.

If you go to the tax office, there's a lot of Asians there and the thing about it is they will inform their people what is going on, how to do this, how to do that. If you go to the tax office to get information – as a black person – that person don't want to give you the information, what the Asian will give their people. As a black person, they're not going to give it to you. (M9-61)

At both the political and the business levels, Asian people were described as more ambitious and more motivated than their African-Caribbean counterparts, and always ready to sacrifice relaxation and pleasure for work.

We are not business people. We are not hard working. In Barbados, Trinidad, in Jamaica now, it's the Indians that are going forward. Same thing here. How the Indians get in there, they're steady. The blacks give up too quick when they're cutting sugar cane. They're not so hard working and they brought the Indians there to do the work. But people now recognise that, and even in this town, there's not many black people drive taxis. The Asians control the whole taxi rank, almost.

The West Indian can't work really long hours. He give up too quick. The Indian could work from 12 till 12, all for a cup of tea and a chapatti. (M11-65)

African-Caribbean people were described as less motivated, more concerned with having a good time.

The Asian people, they know what they're doing. They're either doing business or computers, which is the thing for the 2000. A black man, he just wants to look good with his clothes and everything. That's how we are. That's how we're brought up. We just like to look nice and the rules are we like to be secure. Understand? It's been like that since the days of slavery. (M4-17)

Factors shaping the social construction of in-group and out-group stereotypes

Much work remains to be done in disentangling the social and historical circumstances within which African-Caribbean informants' stereotypical representations of both their own group and the 'Asian Other' are constructed (Campbell and Mclean, 2001a). This is particularly the case given the high levels of poverty and social division characterising the socialled Asian community in our area of interest, which fly in the face of our African-Caribbean informants' stereotypes of 'the Asian community' (Campbell and McLean, 2001b). A number of factors would need to be taken into account in this disentangling task. The most obvious factor shaping the construction of these stereotypes relates to the superior ethnic concentration of South Asian people in our local area of interest, constituting 55% of the local population, as opposed to African-Caribbean people who constitute 5%. This factor was explicitly mentioned by several of our informants, who referred to African-Caribbean people being "swamped" and their voices silenced by superior Asian numbers.

I don't really feel comfortable in this area, because they don't make you feel like you're wanted. They feel as if its their area, that's where they're staying and you're not. They're not willing to you know "we're the ones, we're the most here" – its like that. (ACM3-16)

The less dispersed nature of the Asian community in England was said to be reinforced by different migration styles, with our informants stereotyping Asian families as migrating to common locations in family groups. On the other hand, people commented that siblings leaving the Caribbean Islands had often ended up in different countries, or different places within England.

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³ Smaje (1995) discusses the association between high ethnic residential concentration and positive health. We speculate that social capital could serve as a key mediator of this relationship.

Another relevant factor, also frequently referred to by our informants, involved reference to the way in which collective historical memories of slavery and colonialism penetrated the construction of African-Caribbean identities. The political and strategic advantages enjoyed in the Asian community were linked to a range of 'psychological advantages' that our African-Caribbean informants described as giving Asian people the basis for greater confidence, and hence greater and more effective solidarity. Several people commented on how their history of colonialism and slavery had left the African-Caribbean community with less of a sense of entitlement to government help and support than Asian people, and far less assertive in making claims for their community.

The Asian people have confidence. Not like the enslaved black population, living in the culture of the Windrush generation The reason why today we see the advancements made in the Asian community and the lack of advancement in the Black community, is the Windrush mentality., Asians are not enslaved. Black people are still very much, whether they accept it or not, enslaved. (F5-35)

The Asians, they've all bonded. We've got segregation and division. But then it's not necessarily our fault because 400 years of slavery make you segregated, make you hate each other. (M6-28)

The third factor, also repeatedly referred to by our informants in explaining the perceived relative cohesiveness and unity of Asian people in Britain was the fact that they had a more distinctive culture, and were less integrated into mainstream life – in terms of religion, language, clothing, lifestyle and identity. By contrast, many aspects of African-Caribbean culture and identity had become 'mainstreamed'. This was particularly the case in relation to young African-Caribbean people who had been born in England, who were said to be highly integrated with their white counterparts at the level of friendship, leisure and culture, and at the level of mixed race marriages and parenting.

Young black men were described as particularly integrated into mainstream culture and life, often regarded as leaders of mixed race school peer groups, and drawing their friends interchangeably from black and white groups both in school and in neighbourhood networks. Young black men were often regarded as leaders in school peer groups. People also spoke of the cross-ethnic popularity of black music, and the way in which black slang/patois was now widely used by white youth. They referred to the growing number of black people in television advertisements, as one more sign of how black people were becoming style icons as part of a growing synthesis of white and black youth styles: same dress, same look, same talk, same food.

In many respects this inter-personal and cultural integration was enjoyed and valued. However, in other respects it was not matched at the level of the country's political and economic mainstream. Ironically this mainstreaming at the inter-personal and cultural levels served to undermine the solidarity people felt might have served to mobilise African-Caribbean people more strongly in the interests of advancing African-Caribbean exclusion in politics and economics. Several people argued that that this was one of the reasons why it was so difficult to bring African-Caribbean people together around common issues.

This integration had gone hand in hand with what people perceived as a decline of black consciousness. Thus, for example, people in their 20s spoke of how their teenage years had been enriched by collective memories of the black power struggle culture and music of the 70s and early 80s. They felt this influence had become diluted as time passed and as black people became more integrated into the mainstream culture, with Black Consciousness as a dwindling and under-utilised resource.

Rasta was really strong in that time there still. So like, you know, man, the whole black strength thing was there still, and like they (younger black men) was just learning from like being around them bigger men. There's no way its the same now. Them time, man, they were more and more militant in them times. The youth now, they're a bit soft Yeah, yeah, it's much more integrated, but if integration means that we're going to get weaker and weaker, shit, that ain't really no good still, man. (M6-28)

Divisions within the African-Caribbean community

Another reason that was frequently offered for the lack of an African-Caribbean 'voice' in local community life was a series of divisions within the African-Caribbean community. Local activists referred to these divisions in seeking to explain the logistical difficulties of mobilising local people around community issues of specifically African-Caribbean interest.

We have already referred to the lack of contact between members of the proliferation of black churches. As will have been clear from various quotations from interviews in this paper, while people often referred to themselves as 'African-Caribbean', within this blanket category people often distinguished themselves in terms of particular island identities, such as 'Jamaican' or 'Trinidadian'. One woman referred dismissively to what she called "inter-island crap — where people from some islands would get on better with with other" (F4-32), but said that this was a feature of the older generation rather than the younger. As another said:

There is a difference between black people. You know, you've got Jamaicans, Barbadians, St Lucians. All different type of nation. We could be all black people but, but their attitude is different from different places. There's no link between black people. (F7-68)

People also spoke of the way in which social class divided the black community. Middle class black people were often said to move away from the neighbourhood, preferring to live in more affluent (white dominated) neighbourhoods, and to lose their links with their neighbourhood of origin. Some spoke of the way in which upwardly mobile African-Caribbean people encouraged their children to form friendships with white children, discouraging their children from attending black dominated youth clubs for example. One women spoke of how black people often appeared to lose their critical edge once they joined the middle classes. Only very extreme cases (e.g. the murder of Steven Lawrence) seemed to mobilise them into loudly articulating a black identity.

In the views of our informants, this array of divisions constituted yet another factor which undermined the likelihood of African-Caribbean solidarity at the local community level.

5. Conclusion

In this paper we have drawn on interviews with African-Caribbean residents of a deprived multi-ethnic ward in a south English town. We have done so to highlight how ethnic

identities may be constructed in ways that undermine the likelihood of the local community participation advocated in policies concerned with the reduction of health inequalities. Our findings point to the complexity of translating large-scale quantitative epidemiological research findings into policy prescriptions applicable to real-life contexts. Whilst categories such as "African-Caribbean" may emerge as significant variables in statistical analyses of health inequalities (Nazroo, 1997), such epidemiological categories cannot simply be mapped onto policy directives which involve complex and richly textured social-psychological and community-level phenomena such as social identities or participation.

While calls for the increased participation by socially excluded groups make political and theoretical sense, we argue that such calls need to be backed up with realistic understandings of the obstacles that stand in the way of their implementation. Without such understandings, the best-intentioned policies could inadvertently serve to perpetuate the very inequalities they seek to reduce. Within the social psychology literature on preconditions for participation in collective action, two phenomena are frequently cited as factors likely to promote such participation: a sense of collective identity, and a sense of collective agency or collective efficacy (Klandermans, 1997). In terms of collective agency, in many ways our informants represented the African-Caribbean community as small, dispersed and lacking in economic and political power, as well as psychological confidence -- in the shadow of the relatively powerful Asian community. In terms of collective identity, a strong and positive African-Caribbean identity did exist amongst our informants, but this was centred around the private and personal spheres of friends and family, rather than in the more public spheres of local community, work or politics. Furthermore, contrary to Putnam's area-based notion of social capital as located in specific geographical areas, these personal networks were often not located in the immediate geographical neighbourhood, given the high levels of mobility reported by informants.

Furthermore, the likelihood of the development of a collective identity was further undermined by a dialectic of integration and exclusion in relation to mainstream English society. In some respects people felt that aspects of what were originally experienced as distinctively African-Caribbean ways of being – in relation to factors such as interpersonal styles, youth culture and music – had been welcomed and adopted by mainstream English

people. These aspects of what people referred to as African-Caribbean culture were no longer experienced in an ethnically defined way. Yet that social inclusion that did exist was by no means straightforward, going hand in hand with many experiences of exclusion in the workplace, in politics, in school and so on. Furthermore, both predictable and unpredictable experiences of racist hostility and insult, while far less frequent than in the past, were still an ever-present possibility. Interviews suggested that peoples' experiences of what might be called 'partial inclusion' had in some ways served to undermine a sense of African-Caribbean solidarity that might have united people to mobilise against the negative consequences of their 'partial exclusion'.

We hope that our paper has contributed to three areas of current debate. Firstly, in relation to policy initiatives to reduce ethnic health inequalities: our data have highlighted the limitations of policy recommendations which simply advocate grassroots participation in community networks as a means of tackling health inequalities, without acknowledging the obstacles to such participation, and making recommendations for addressing these. Without an acknowledgement of such obstacles, such policies could be accused of circularity, through advocating increased participation by black and minority ethnic group members as a solution to their social exclusion -- when such groups are, by definition, socially excluded because they do not participate. Secondly we hope to have contributed to the social capital literature which to date has devoted little attention to the role of ethnic minority status in shaping the ways in which people create, sustain and access social capital. Social capital is not a homogenous resource equally available to all members of a geographical community, but is shaped and constrained by factors such as gender, ethnicity and social class. Our findings highlight how ethnic identities may be constructed in ways that make it unlikely that people will identify with local community networks as representative of their needs and interests, and unlikely that they will have the sense of collective agency which would motivate such participation.

Finally we hope to have highlighted the relationship between ethnicity and social capital in a way that illustrates Bourdieu's claim that social capital plays a role in the processes whereby social inequalities are reproduced. If local community participation is indeed one of the ways in which a group of people are able to advance their social interests, our interviews highlight the way in which the construction of ethnic identities — within the context of the material and

symbolic exclusion characteristic of British society – may serve to undermine such advancement of interests. So too may the best-intentioned social policies if they fail to explicitly recognise the way in which various forms of material and symbolic exclusion impact on identity construction in ways that undermine the likelihood of such participation.

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