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Report

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The Initial Report of CASE's Areas Study

Ruth Lupton

February 2001

Centre for Analysis of Social Exclusion

The ESRC Research Centre for Analysis of Social Exclusion (CASE) was established in October

1997 with funding from the Economic and Social Research Council. It is located within the Suntory

and Toyota International Centres for Economics and Related Disciplines (STICERD) at the London

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SUMMARY

The Study

'Places Apart?' is the first report of CASE's study of disadvantaged areas. The study aims to establish and explain the current direction of change in the poorest areas in the country, where social exclusion is concentrated. Are such areas recovering or getting worse? And how are they faring relative to others? Is polarisation increasing or decreasing? What causes areas to recover or decline? Why do some recover and others not? What are the impacts, positive and negative, of policy interventions, and what can we learn for regeneration policy?

To answer these questions we are following twelve small areas in detail, over time, using both local data and qualitative information to understand the trajectories of the areas in relation to the cities or boroughs in which they are located, and to the national picture. The areas were selected to reflect the distribution and characteristics of the top 3% most deprived wards in the country, using measures based on 1991 Census data.

This report is based on fieldwork and desk research carried out during 1999/00, and sets out the baseline position at the start of our study. We will follow the areas from this point until 2002 and hopefully until 2007.

Findings

Commonly Experienced and Deeply Embedded Problems

The most deprived areas and neighbourhoods have multiple problems:

- Unemployment is higher than average, and in every case, levels of literacy and educational attainment are lower than average.
- Educational participation, both at school and among adults, is low and there is a thriving informal economy.
- There are problems with the quality and maintenance of the housing stock.
- Crime is above average and there are concerns among residents in all areas about drug use and dealing.
- Shops, banks and other vital services are struggling, although a reasonable level of provision remains in most areas.

- The areas are all regarded as undesirable relative to other areas around them, and the stigma that is attached to them is difficult to shift.
- Levels of physical and mental ill health are high.
- Early childhood disadvantage associated with poverty and with parenting problems and family fragmentation is a common problem across the areas, starting a cycle of disadvantage that is difficult to break.
- Many people lack confidence in their own abilities and prospects, and in their ability to effect
 change in the neighbourhood and influence decision-making by local agencies. In many areas
 there is a mistrust of authority and, under pressure, social networks in some communities
 have become narrower and less inclusive.

Many of these problems are deeply embedded. They have grown up over a long period, and have affected people's sense of identity and confidence, and their attitudes and interactions with others, as well as more tangible outcomes. They are not going to be resolved in a few years by general economic recovery or area-based interventions. Sustained investment will be needed to effect change.

Community Potential, Services and Investment

Yet while there are severe problems, disadvantaged areas also have much to build on. Some of the very negative media coverage of these areas is resented by their residents and felt to be inaccurate. 'Community' has not collapsed. In over half of the areas, the strength of the community and the people in it came through as one of its major assets. Even in areas where there had been a breakdown of social order precipitated by the behaviour of some residents, residents did not describe a loss of community, but rather a tightening of existing, trusted, social networks, albeit less trust and inclusion of newcomers. Most areas have strong formal social organisation as well as informal links. In some, residents are taking a lead in regeneration programmes. Existing community networks, self-help and mutual aid activities are a major strength of these areas and it is essential that they are encouraged and supported.

Services in these areas are under extreme pressure because of the high demands placed upon them. Some services, in some areas, <u>are</u> inadequate, and many people regard additional investment in mainstream services as critical. However, in most areas, the level of service provision is at least as good as in other areas in the city or Borough, and in some, it is better. The areas have certainly not been abandoned by public services. The provision of these services is seen as essential in limiting their problems. Two thirds of them currently have a major area-based programme funded by central government, or have recently had one. All are benefiting from at least one area-based programme or

zone, most of which have only started recently. Thus central government funds <u>are</u> getting to the most deprived areas.

Despite the problems, the areas have potential for improvement, and we should expect to see change for the better during the period in which we are following them.

The Diversity of Disadvantaged Areas

It is a mistake to think of deprived areas as though they fit a particular blueprint. The areas in this study include inner city areas, outer estates, a seaside town and mining villages. There are areas of mixed tenure as well as Council estates, white working class areas as well as those with a dominant ethnic minority group and those with diverse ethnicity. Some of the areas are relatively attractive and in good physical condition. Others are extremely run down. Some have few empty properties while others are between a fifth and a half empty. Some are renowned for crime and drug problems, while others are not. Some have excellent facilities and services, while residents of others complain that they have been neglected over the years. In some, there is a myriad of community groups and voluntary organisations; in others relatively few. Residents of some talk about the strength, homogeneity and stability of the community, whilst others note rapid population change and a diversity of different people and interests. In some areas, our 'baseline position' comes at a time of very rapid change, whereas other areas are currently more stable. Some areas are experiencing economic recovery close to the national rate. Others are lagging well behind, even relative to other areas in the same cities.

Disadvantaged areas may share some common problems, but they are vastly different in their history, character and infrastructure. What will be appropriate for one area may not be right for another. The study illustrates the need for locally tailored strategies, building on local knowledge and experience, as well as the need for national strategies to address common difficulties.

Understanding Area Change: Elements of 'Regeneration' and Influences on It

Area and neighbourhood characteristics are of three kinds. When we talk about an area improving or declining, we may be referring to a number of different features or characteristics of the area, driven by influences at different levels:

Intrinsic characteristics, well established and hard to change. These include location, transport
infrastructure, housing and economic base. These are usually determined both by local factors
and broader city or regional influences.

- Population characteristics. Changes in population composition also tend to reflect regional or citywide trends, mitigated by local factors such as high crime or the quality and availability of housing.
- Characteristics that are acquired over time as the least advantaged people become concentrated in the least advantaged neighbourhoods. These include reputation, environment, facilities and services, levels of crime and disorder, and aspects of social life such as the extent of social interaction and residents' levels of confidence in the neighbourhood. These characteristics tend to be determined much more locally than intrinsic characteristics and population mix, and for this reason they are more susceptible to local intervention.

Dire neighbourhood conditions are not an inevitable consequence of concentrated deprivation. They can be improved by good local management, sustained investment in services and effective involvement of local people. However, we need to distinguish between 'management' (these efforts to improve local conditions) and 'regeneration', which will also require action at higher levels; for example control over new housing development in the city, or strategic economic development. The study demonstrates the need for effective management action at the most local level, as well as for the integration of local regeneration strategies with much broader policies extending beyond the neighbourhood.

Cautious Optimism

Optimism about area change must remain muted at this stage. There have been neighbourhood-level changes in many areas; physical estate improvements, better facilities or more involvement in decision-making. Some areas have seen improved policing and reduced crime, and there have been improvements in most of the schools. But other problems are more stubborn. There remains a significant minority who are alienated from the world of education and work. Informal and illegal economies offer alternatives to formal work. Though unemployment has fallen significantly, it has fallen less, as a proportion of its 1996 level, than the national average and in most cases than the surrounding city or Borough. Drug dealing and use in some areas, where heroin has re-emerged, seems to be increasing. The cycle of deprivation fuelled by poor health and early childhood disadvantage is yet to be broken. These are bigger problems for society as a whole, and in areas where they are concentrated, their impact is profound and continuing. Despite some improvements, these areas still have severe difficulties. They remain well apart from the rest of the country. Intensive and continuing intervention is still needed to promote their recovery.

Introduction

The Spatial Dimension of Social Exclusion

LSE's Centre for Analysis of Social Exclusion (CASE) was established in September 1997, reflecting the growing importance of the notion of social exclusion in British social policy. Tackling social exclusion is, in the Prime Minister's words "our national purpose" and "at the heart of all our work" (Tony Blair, 1997).

Launching the government's Social Exclusion Unit, Tony Blair defined social exclusion as being:

"about income but it is about more. It is about prospects and networks and life chances. It's a very modern problem, and one that is more harmful to the individual, more damaging to self-esteem, more corrosive for society as a whole, more likely to be passed down from generation to generation, than material poverty" (Tony Blair, December 1997)

Thus, in the government's understanding, social exclusion is multi-dimensional, incorporating more aspects of deprivation than simple material poverty. It is a relative state, reflecting inequalities between members of society rather than absolute conditions, and it is an involuntary one; society excludes people rather than them choosing to exclude themselves. And social exclusion is dynamic, applying not just to an individual's current circumstances but to their future opportunities and prospects and even to their children's prospects (Atkinson, 1998).

Like poverty, social exclusion is spatially concentrated. Compared with the rest of the country, the 44 most deprived local authority districts have nearly two thirds more unemployment, almost one and a half times the proportion of lone parent households, mortality ratios 30% higher, roughly a quarter more adults with poor literacy or numeracy and two to three times the levels of poor housing, vandalism and dereliction (Social Exclusion Unit, 1998). More than one third of the unemployed lives in these districts (Smith 1999).

At small area level, the contrast between the most disadvantaged areas and others is even more marked. For example, in Manchester, mortality ratios are more than 50% higher in the worst wards than the best, and proportions of low-weight births five times as high (SEU,1998). In Newcastle, the unemployment rate in the worst affected ward in April 1998 was nine times as high as in the best.

The poorest electoral wards in the country have two or three times as many people without work as their most advantaged neighbours (Lupton and Power, 2001, forthcoming).

That poverty is spatially concentrated is nothing new. Industrial Britain has always had poor areas and indeed, has always had studies of poor areas (Glennerster et al. 1998). However, over the last century, the relative deprivation of the poorest areas has got worse as absolute poverty has diminished (Gregory et al. 1999). The gap between the poorest local authority areas and the rest is widening. Moreover, the 1980s saw a particular increase in intra-urban polarisation, with increasing contrasts between poorer and more affluent electoral wards within cities. For example, while economic inactivity fell in the best tenth of wards from 16.7% to 13.5%, in the worst tenth it fell much less (from 29.3% to 28.6%) (Hills 1995). Local studies in this period show the same pattern of increasing polarisation and sharpening residential segregation. (Noble and Smith, 1996; SEU, 2000).

The evidence suggests both an increasing polarisation between neighbourhoods, at least during the 1980s, and the simultaneous and inter-linking concentration of multiple problems in the same places. The Social Exclusion Unit has identified up to 4000 neighbourhoods which are not only poor but which are 'pockets of intense deprivation where the problems of unemployment and crime are acute and hopelessly tangled up with poor health, housing and education. They have become no-go areas for some and no-exit zones for others.' (SEU, 1998: 9). Just as some individuals in society are socially excluded, with multiple disadvantages and few prospects, some neighbourhoods, where problems are concentrated, may also be at risk of exclusion, getting relatively more disadvantaged as other areas get richer.

CASE's Study of Disadvantaged Areas

Our study starts with this evidence of the existence of severely disadvantaged small areas and neighbourhoods. It aims to understand the dynamics of area trajectories at a level beyond the individual and the family. What is the direction of change in these areas, relative to others? And why do some areas recover when others do not? What is driving area change? What is the impact, positive and negative, of policy interventions, and what can we learn for regeneration policy?

Figure 1 shows the broad questions which our study aims to answer.

Figure 1: Research Questions

Direction of change Reason for Change Are the most deprived areas closing the gap To what extent does broad economic recovery on others, or getting further behind? Is the drive change in the poorest areas? Do the poorest polarisation of the 1980s continuing? areas 'rise up with the rising tide'? Alternatively, do policies which reinforce area polarisation (eg housing) predominate over economic forces? Is this pattern generalisable, or does it vary between different types of area? To what extent is area change driven by the changing market for labour or housing? What are At what level is change taking place? Are the market forces which are impacting on the we seeing changes in the hierarchy of small poorest areas, and what is their impact. Is an area neighbourhoods within districts, or changes obsolete when the workforce is no longer needed in the fortunes of larger areas, cities or or when its infrastructure becomes redundant? Or regions? Is the direction of change the do areas revive after they hit rock bottom and the same at all levels? scope for new investment is completely open? Is government intervention a key factor in area change? Can it prevent or reverse other trends or only manage decline? Does it obscure or detract from the need for more radical long term policies for declining areas, or divert resources into areas with recovery potential at the expense of those which can be saved? Is area decline a symptom of dynamic migration patterns, with some areas constantly 'zones of transition' or are there areas of permanent poverty with little movement in or out? Do areas gather their own momentum of decline, and if so how? To what extent are area problems created by the people who live in them, as cultures develop which conflict with mainstream values and help to fuel area decline? What is the relationship between population mix and neighbourhood conditions? Is there a threshold of concentrated poverty that always generates decline? Alternatively, is there a level of decline that always prevents beneficial population mix? At the local level, what factors protect against area decline? What kinds of local institutions and forms of civil society help, and how are these best developed and sustained?

Some of these questions, particularly about the directions of change, are also being addressed elsewhere in CASE, through the analysis of large-scale datasets. But quantitative methodologies are limited in their explanations of small area social exclusion and change. Consistent data at the very local level is often lacking, meaning that many analyses can only offer explanations of regional or local authority level differences. Quantitative data analysis tends to isolate variables, rather than to illuminate their interaction, and is limited in the extent to which it can shed light on the processes of exclusion and inclusion, rather than their outcomes. Thus large scale data analysis needs to be complemented by small-scale, local studies which draw on a wider range of data and on qualitative understanding of the processes or change and their interactions.

It is this detailed local understanding that we are seeking to gain through our study, which follows twelve small areas of concentrated social exclusion, over time, through local data analysis and qualitative interviewing, and in relation to the areas around them and the national picture. Chapter 1 explains how we selected these areas and our methods of data collection.

The study began late in 1997 and will continue throughout the period of CASE's funding; until 2002 initially and 2007 if the Centre's funding from the Economic and Social Research Council is renewed. The first year, 1998, involved analysis of the distribution and characteristics of areas of social exclusion and the selection of twelve to study in depth. During 1999, we began to collect data about the twelve and conducted about thirty interviews in each, to understand their history and to establish a baseline position from which to monitor change. This is a report of that baseline position. It is essentially descriptive. Chapter 1 describes our methodology and gives a brief introduction to the areas. Chapter 2 summarises the position across the twelve areas; their characteristics, problems and strengths. Chapter 3 presents evidence of aspects of social exclusion in the areas and looks at some of the policy interventions aimed at helping their recovery. Chapter 4 assesses how the areas are changing, drawing on the initial data we have collected since 1998, and on qualitative evidence, and Chapter 5 draws conclusions. The report is underpinned by twelve area case studies, containing detailed descriptions and statistical data, which are available on request.

The report will be followed, in 2001, by a book on areas of concentrated social exclusion, analysing in more depth the data we have collected, and drawing more widely on theories and evidence of area change. Meanwhile we are continuing to monitor the areas and will return to conduct a further set of interviews in 2001/02. A further book will follow after the 2001 Census. This report is the beginning of the story, not its end.

Chapter 1: Identifying and Understanding Disadvantaged Areas

Identifying Areas of Concentrated Social Exclusion

Our study focuses on areas where social exclusion is concentrated. But how can we identify such areas, when there is no single measure of social exclusion, and no clear agreement on what constitutes an 'area'? Different studies have used different indicators. Some have looked at local authorities, others at wards, estates or neighbourhoods (Lee et al 1995, Lee and Murie 1997, SEU 1998, Howarth et al 1998, Smith 1999).

Our approach was to use two measures of area deprivation based on 1991 Census data. These were a measure we labelled as 'work poverty': the proportion of people of working age without work, not studying and not part of a government training scheme, and the 'Breadline Britain Index' (BBI) which is a broader measure of relative deprivation. In combination, these serve as a good proxy for exclusion or at least for the risk of exclusion. An earlier working paper (Glennerster et al, 1999), explains our use of these measures in more detail. Both measures refer to electoral wards. We decided that wards which featured in the top 5% on both measures could reasonably be considered to be the most deprived in the country, with the highest concentrations of social exclusion. There were 284 such wards, out of a total of over 9000 in England and Wales. We refer to these as 'poverty wards'.

It made sense to use wards as the basis for our initial selection of areas, because data is consistently available at ward level. However, wards are of different sizes, averaging about 5,000 population, but ranging from 1,000 up to about 32,000, and they reflect electoral arrangements rather than necessarily marking the boundaries of identifiable areas that make sense to local people. We recognised that ward level analysis would only be a start. A ward level analysis would identify very deprived areas which could be the core of our study areas, and from this point we could draw boundaries for the areas which reflected more accurately the perceptions of those living and working there.

The Characteristics and Distribution of 'Poverty Wards'

In 1991, these wards had, on average, more than twice as many deprived households as other wards (using the Breadline Britain index) and nearly twice as many people not working, studying or training. Their average unemployment rate was more than three times the average for other wards. Levels of

chronic ill health were significantly higher and car ownership significantly lower, as shown in Table 1.

Table 1: Mean Deprivation Scores of Poverty Wards and Non-Poverty Wards

Deprivation Indicator	Poverty Ward Average	Average for All Other Wards
% Deprived Households	38	17
% of Working Age Population Not Working, Studying or On a Government Scheme	45	23
% Unemployment	24	8
% Residents in Households without Car	56	19
% Residents with Limiting Long Term Illness	18	10

Source: 1991 Census

Census data also showed that:

- Most poverty wards had very high proportions of public housing (mean 53% compared with 16% for all wards). Nearly two-thirds (62.6%) of the poverty wards had 50% or more public housing.
- Popular stereotypes of poor areas as having highly mobile populations are not borne out. Most poverty wards had stable populations. Average population turnover was the same as for other wards (10%). Levels of private renting, a tenure often associated with population instability, were also the same (6%). Although more volatile population trends may be evident in smaller neighbourhoods (Power and Mumford 1999), they do not have an effect at ward level.
- Most poverty wards (70%) were predominantly white, with fewer than 5% of their population from an ethnic minority. However, compared with the country as a whole, this is a low proportion of white wards. 88% of all wards in England and Wales have fewer than 5% ethnic minorities. Thus areas with high ethnic minority populations were over-represented among poverty wards.
- Poverty wards had, on average, higher proportions of children aged under 14 than other wards (23% compared with 18%) and higher proportions of large families with four or more children (9% compared with 4%).
- In poverty wards, far more children (28%) were in single adult households than was the case in other wards (11%). A large majority (87%) of the poverty wards had more than 1 in 5 children in a lone adult household, compared with just 8% of the non-poverty wards.

Apart from a small number of stray wards located in prosperous areas, the vast majority of poverty wards were in areas of established decline and disadvantage. 78% of the wards were in the North East, North West, Merseyside, London or Wales. This distribution is shown on Map 1. The picture is not of a North/South divide per se, but of clusters of poverty in large cities and pockets of poverty in other areas.

The map shows that deprived wards are mainly an urban problem. 89% of the poverty wards were in urban areas. 57% were either in London or the metropolitan counties (Merseyside, Tyne and Wear, Greater Manchester, West Midlands, South Yorkshire and West Yorkshire), although these areas account for just 17% of wards overall.

Moreover, whereas poverty wards in small towns or rural areas tend to be scattered, poverty wards in urban areas tend to be clustered together. Overall, 65% of the poverty wards were in 'clumps'; that is to say they were located adjacent to one or more other poverty wards. As Table 2 shows, 'clumping' was much more common in large urban areas than in smaller authorities. Some cities have extremely large poverty tracts; the largest being the Liverpool cluster with over 250,000 people living in a single uninterrupted stretch of adjacent poor areas.

Table 2: Extent of Clumping in Different Types of Local Authority Area

Type of Authority	% Poverty wards which
	are clumped
Metropolitan District	82.1%
Unitary District	66.7%
London Borough	58.8%
Non Metropolitan District	39.0%
Welsh District	27.6%

Areas that are isolated pockets of poverty in otherwise more affluent areas clearly present different issues for residents, local service managers and policy makers than ones which are part of large tracts of deprivation.

Selecting Areas and Neighbourhoods for Our Study

Most studies of disadvantaged areas that have used a qualitative as well as a quantitative approach have focused on one area (such as Willmott and Young's 'Family and Kinship in East London') or drawn on a small number of case studies, usually no more than four (such as Forrest and Kearns'

recent review of neighbourhood images in four areas). We opted for a bigger sample, twelve, and used a three-stage selection process¹ in order to be able to draw conclusions about poor areas in England and Wales generally, and to explain the influences on change by comparing and contrasting different types of area. First, we used the Office for National Statistics classification of local authorities to classify the 284 poverty wards by region and type of area. They mainly fell into six area types (Inner London, Areas with Inner City Characteristics, Coastal Industry, Coalfields, Manufacturing and Others). We decided to select two from each type, reflecting the regional distribution. For example, poverty wards in manufacturing areas were mainly found in the North West and West Midlands, so we decided to seek one from each of these regions, and identified the local authorities in which they were located. From these local authorities, we selected two to approach to take part in the study. This process is shown in Figure 2. It led us to the following selection of local authorities, indicated on Map 2:

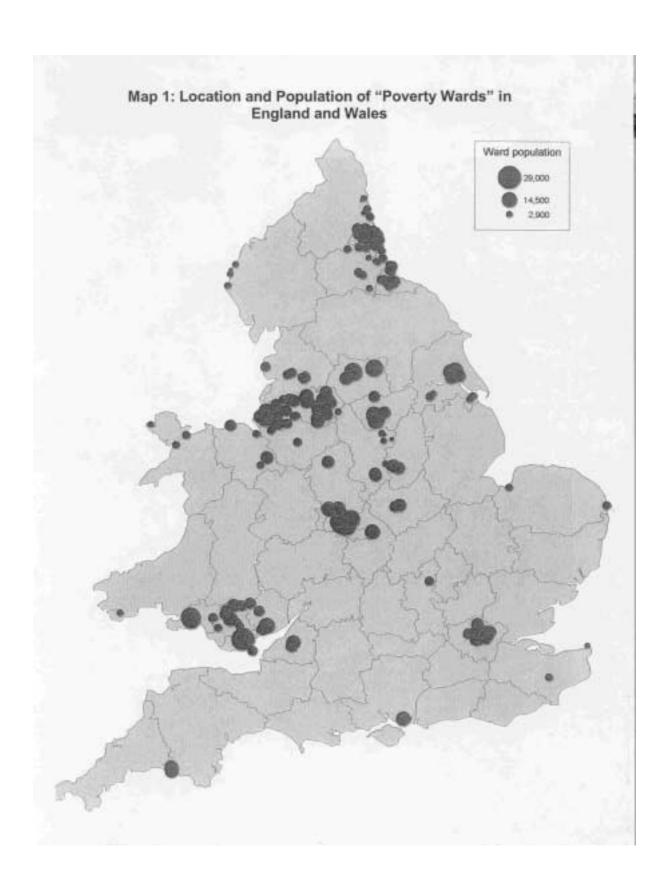
Hackney
Newham
Knowsley
Nottingham
Sheffield
Newcastle-Upon-Tyne
Blackburn-with-Darwen
Birmingham
Caerphilly
Redcar and Cleveland
Leeds
Thanet

The second stage was to select one area (of about 20,000 people) in each local authority. Each contained at least one 'poverty ward' (or part thereof), but was not necessarily defined by ward boundaries if others (such as regeneration scheme boundaries or local authority sub-areas) made more sense locally. The basis for our selection was that the final sample of twelve should:

- Match the overall distribution and characteristics of poverty wards.
- Include at least two matching areas on each of a selection of key area characteristics, so that we could always compare an area with at least one other. For example, two inner city areas, two areas with high ethnic minority populations and so on. Figure 3 shows this selection matrix.
- Include a range of government programmes and local authority interventions
- Include not just areas in decline or showing signs of decline, but also stable areas, and those recovering or showing signs of recovery.

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¹ Full details of the selection process are documented in an earlier publication: Poverty, Social Exclusion and Neighbourhood: Studying the Area Bases of Social Exclusion, Casepaper 22 (1999).



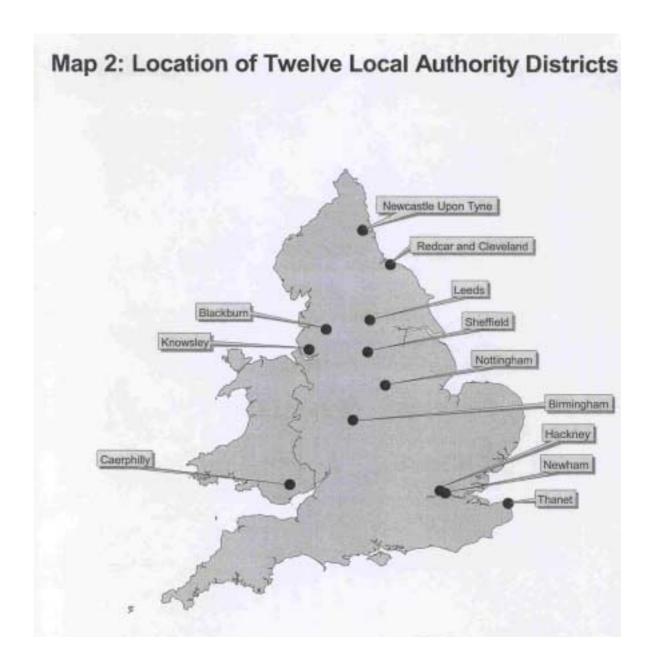


Figure 2: Selection of Local Authorities by Area Type and Region

Area Type Classification of Poverty Wards

(showing number of all poverty wards (total =284) in each classification)

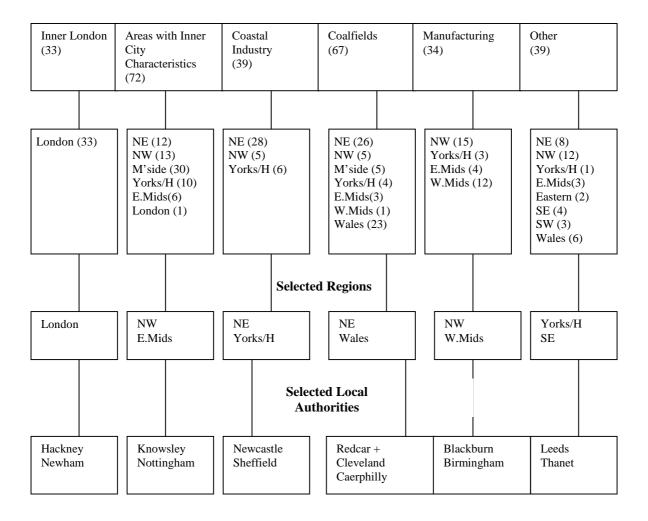


Fig 3: Characteristics of Selected Areas

ONS Area Type	Local Authority in Which Area Located	Area (false name)	Clump	No clump	Above average owner occ for pove wards	Above av social housing for pov. Wards (53%)	Above average private renting for pov.wards	Mainly terraced (50%+)	Mainly flats (50%+)	Significant ethnic minority population (15%+)	Mainly white	v.high unemployment (30%+)	v.high lone parents (30%+)	Inner Urban Core	Outer Urban Core	Other
Inner London	Hackney	West-City	✓			✓			✓	✓			✓	✓		
	Newham	East-Docks	✓			✓			✓	✓			√	√		
Areas with	Knowsley	Overtown	✓			✓		✓			✓	√				√
Inner City Characteristics	Nottingham	Riverlands	√				✓			✓				√		
Coastal	Newcastle	Shipview	✓			✓		✓			✓	√	√		✓	
Industry	Sheffield	The Valley	✓		✓		✓			✓				✓		
Manufacturing	Blackburn	High Moor		✓		✓		✓			√		✓			✓
	Birmingham	Middle Row	√		√		✓	✓		√		✓		√		
Coalfields	Caerphilly	Fairfields	✓		✓			✓			✓					✓
	Redcar and Cleveland	Southside	√			✓		√			√	√	√			√
Other	Leeds	Kirkside East		√		✓					✓				√	
	Thanet	Beachville		✓		✓	√				✓		✓			✓
Total	<u>'</u>	<u>'</u>	9	3	3	8	4	6	2	5	7	4	6	5	2	5

Figure 4: Brief Description of Areas and Neighbourhoods

Nam	e of Local	Area (false names)	Neighbourhood (false names)
Auth	nority		
1	HACKNEY	West-City	The Grove
		Adjacent City. High proportion Council housing. Business/market area. Some	Large Council estate. Poor quality housing stock. Higher proportion of older
		gentrification. NDC area.	tenants and white people than rest of Hackney.
2	NEWHAM	East-Docks	Phoenix Rise
		Formerly white working class area, becoming more diverse. Council housing and	Council estate, mainly flats and maisonettes. Highest unemployment in area.
		industrial sites. Close new business and transport . Potential for growth. SRB area	Demand among lowest in Borough Higher turnover than other estates.
3	KNOWSLEY	Overtown	Saints Walk
		Mainly Council estates, high unemployment, high lone parenthood, poor school	Small Council estate with severe socio-economic problems. Successful action
		performance. SRB and NDC area. Active community involvement.	against drugs/intimidation. Recent estate improvements.
4	NOTTINGHAM	Riverlands	Rosehill
		Inner City area adjacent city centre. Sizable black and Asian population. High lone	Small 1970's Council estate with shopping precinct and poor design.
		parenthood. Close to major redevelopments. No major regen. programme now.	Bedsit/flat block attracts transient population. £12m regen. programme
5	NEWCASTLE	Shipview	Sunnybank
		Area close to river and docks. Mainly interwar council estates. Stable white	Small Council estate in more affluent ward. Bad reputation. Starting to decline.
		working class area. Low housing demand. SRB.	Drugs problem and increasing voids.
6	SHEFFIELD	The Valley	East Rise
		Adjacent inner city. Mixed area. Council flats (high voids) and other tenures.	Mixed tenure area. Poor quality private housing stock. Council flats-low
		Some light industry. Mixed ethnic. SRB and NDC area	demand. Mixed ethnic. Pockets of drug/crime problems.
7	BLACKBURN	High Moor	Bridgefields
		Area of mainly white council housing and some terraced streets with high Asian	1970's Council estate. V.bad reputation and severe voids problems. Lots of
		population. SRB funding from thematic programme	investment. Major redevel. planned to redesign and diversify tenure.
8	BIRMINGHAM	Middle Row	Broadways
		Inner city area. Mixed tenure. Large Asian minority. Exceptionally high	Mixed tenure area of Victorian street property, much in poor condition.
		unemployment. Poor health. Busy shopping/restaurant area. Large SRB	Renovation programme underway. Asian majority (over 70%).
9	CAERPHILLY	Fairfields	Valley Top
		Six towns/villages in upper valley. Former mining community. Poor transport	Strung-out town. Several Council estates and private housing. Low attainment
		links. Isolated. Mixed tenure. 'People in Communities area'	and high unemployment and economic activity. Regeneration programme.
10	REDCAR &	Southside	Borough View
	CLEVELAND	3 distinct communities built to serve industrial plants. Mixed tenure. Two had	Small town including Council estate, RSL and private terraced housing. Major
		rapid major decline and are being regenerated. One starting to decline. SRB area	problems of crime, abandonment. SRB programme- situation stabilising
11	LEEDS	Kirkside East	Southmead
		Very large Council estate. Strong stable community. Various thematic SRB and	Part of Council estate. Higher proportion of large homes. Concentrated
		many Council initiatives. New shopping centre bringing employment.	problems. Low housing demand. Environmental decay and voids.
12	THANET	Beachville	Sandyton
		Declining seaside town. Mixed tenures. Low wage economy and high	Former hotel area. Many properties converted to HMOs. Concentration of
		unemployment. Nickname 'Dole on the Sea'. Economic growth possibilities	refugees, homeless. Small thematic SRB

Figure 4 shows the selection of areas and offers a brief description.

Finally, we selected a smaller neighbourhood in each area, so that we could analyse change at neighbourhood level, as well as at area and local authority level. These vary in population between 1,000 and 7,000 and in all but one case, they are contained within a single electoral ward. They have logical boundaries that make sense to local people; typically a housing estate or a distinct neighbourhood bounded by roads, railways or open space.

The final selection of neighbourhoods corresponds well to the overall profile of poverty wards, matching almost exactly on area type variables (ie clustering, location, housing type and tenure) and closely on measures of population composition and deprivation, although with a slight overemphasis on the extremes of the distribution. All of the key characteristics in Figure 3 are covered at least twice. As with our selection of areas, we chose neighbourhoods with a range of different trajectories, regeneration programmes and other interventions. A brief description of the neighbourhoods appears in Figure 4.

Figure 5 shows the rankings of the areas using the ward deprivation indices used for selection. Nine of the areas cover more than one ward, so we show the highest and lowest ranking ward in the area under each index. Overall, Overtown (in Knowsley), Southside (in Redcar and Cleveland) and Shipview (in Newcastle) appear the most deprived. These are all white working class areas of industrial decline.

Figure 5: Ranking of Wards in Areas on Breadline Britain Index² and Work Poverty Indices

Wor	k Poverty Ind	lex	Breadline Britain Index			
Area	Highest Ranking Ward	Lowest Ranking Ward	Area	Highest Ranking Ward	Lowest Ranking Ward	
Overtown	1	214	Overtown	5	459	
Southside	5	1669	Shipview	11	1245	
Middle Row*	37	37	Southside	20	1467	
Shipview	57	1898	West-City	21	199	
High Moor	62	412	East-Docks	36	416	
Fairfields	69	285	High Moor	70	928	
East-Docks	74	515	Middle Row*	97	97	
Beachville	200	2002	Riverlands	126	475	
Riverlands	255	430	Kirkside East*	178	178	
West-City	261	723	The Valley*	241	241	
The Valley*	279	279	Fairfields	331	1594	
Kirkside East*	423	423	Beachville	418	3731	

Total wards = 9363

* area is entirely contained in one large ward, so only one score applies

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² The Index of Local Deprivation was not used because it does not cover Wales

Understanding The Dynamics of Areas of Concentrated Social Exclusion

Having selected the areas and neighbourhoods, we have two main objectives, relating to the research questions we set out in Figure 1. These are:

- to document and explain multiple dimensions of change at local level
- to understand these changes, and the interactions between them, from the perspectives of those involved.

These objectives led to the use of both quantitative and qualitative measurement methods. Quantitatively, we are using statistical indicators to document change over time. We are using three main types of indicators of area fortunes. The first type measures features of the area that impinge on the fortunes of residents and also influence population mix. There are direct measures, such as levels of crime, the condition of the housing stock, and the number of job vacancies, and indicative measures, such as house prices. These indicators will begin to show us whether the areas are improving or declining as places to live.

The second type measures dimensions of social exclusion. These are aggregate outcome measures, such as the number and proportion of people claiming benefits, unemployed, suffering ill-health, lacking skills or qualifications. Through analysing these kinds of indicators, we will see how the fortunes of people living in these areas change over time, whether the concentration of social exclusion increases or decreases. Some changes will occur because the circumstances of existing residents change. For example, people move from unemployment to work, or their health improves. Others will occur because the population characteristics of the area change, because some people move out and others move in. Thus the third type of indicator is that of population composition. Reliable data for all areas is only available through the decennial Census, but we will seek to supplement this with other local data wherever possible. For example, we can collect data on the ethnic composition of school populations, the composition of the benefit-claiming population, the number of births and deaths, and the number of refugees and asylum seekers.

Figure 6 gives a summary of these indicators. The full list, and the data, is contained within twelve detailed area profiles.

Figure 6: Summary List of Indicators

Measures of Area Factors	Aggregate Measures of Dimensions of Social Exclusion	Measures of Population Composition
The Economy Employment in different sectors Housing Housing type, tenure and condition House prices Housing demand, waiting lists and empty properties Physical Environment Proportion of Derelict Land Crime Numbers and rates of different types of crime and disorder offences	Deprivation Rankings on deprivation indices Income Levels of car ownership Benefit claims and Free School Meals Work and Worklessness Unemployment Incapacity Benefit claims Health Long Term Limiting Illness Mortality Rates Education, Skills and Training Levels of further and higher education participation and qualifications Levels of literacy Attainment at Key Stage 2 and GCSE School Absence rates Social Environment Electoral turnout Teenage conceptions Children in care and at risk	Population size and density Ethnic composition Refugees and Asylum seekers Household Composition Births Deaths and Migration

From this statistical data, we are building up a profile of each area which we can compare with the Borough, regional and national position, and use to monitor the trajectory of the area over time. Wherever possible, we are collecting data at four levels; neighbourhood, area, city/borough and national so that we can analyse local area change in relation to the bigger picture. We are analysing Census data from 1991 in detail, and using selected data from earlier Censuses to track key changes over a longer period. Other (non-Census) data is being collected on an annual basis from 1998, or earlier if data sources allow, and will continue at least until 2002 and hopefully until 2007 should the Centre's funding be continued.

However, not all elements of our twelve areas are measurable through hard data. We have no statistical measures with which to capture local conditions, residents' experience of local services, the style of political leadership, the number and type of social institutions and community interaction. It is hard to measure some dimensions of social exclusion, such as stigma or fear of crime. More importantly, statistical data do not enable us to explain all of the processes of change and the interactions between them. For example, how do local services and facilities impact on residents' confidence and commitment to an area; how does investment in the physical fabric of a neighbourhood impact on housing demand and population mix? These are aspects of the area that we can only measure through qualitative interviews with front-line workers and residents and through our own observations.

In the first year of fieldwork, 1999, we conducted over 300 interviews (20 to 35 in each area) with local residents (mainly community activists), housing managers, social workers, headteachers, police officers, health visitors, religious leaders and others. We intend to conduct a similar round of interviews with the same informants every two years, with the next round in 2001.

Figure 7 gives a list of typical informants in an area. Informants were identified initially through a local authority liaison officer with good knowledge of the area, and later through 'snowballing' as one interviewee would refer us on to colleagues or organisations with useful knowledge. In addition to these formal interviews, we also attended over 20 youth groups, tenants meetings and local conferences.

Interviews were set by telephone and conducted in person. The fieldwork for each area took 7-10 days, completed within a one-month period. The interviews were semi-structured and typically lasted about one hour. All the interviewees were asked about their impressions of the area, its strengths and weaknesses, how it compared with other areas, and how and why it had changed. Each interview also asked about the interviewee's specific area of work. For example, we asked housing managers about housing demand, stock condition and management problems; community workers about the types of community groups and their development and impact.

Figure 7: Typical List of Informants in an Area

Local authority policy or regeneration department Local regeneration manager Local housing manager Local authority area coordinator Primary headteacher Secondary inspector Local police inspector Social Services Area manager Job Centre manager/advisors Economic development manager/ TEC representative Community development worker Community and youth workers Tenants or residents representatives (and other residents) Representatives of community and voluntary groups Local religious leader Ward councillor Business representative Health worker (eg health visitor) Estate agent/lettings agent

This first round of qualitative work had two objectives. One was to add to the descriptive picture of the areas provided by the statistical data. Through our interviews and observations we have documented neighbourhood conditions, facilities and services, social organisation and policy interventions. We have also identified local problems and issues, the nature and extent of social exclusion, and the strengths and resources within the area. All of the fieldwork was carried out by one researcher, enabling a consistent view across areas and across services.

Our other objective was to start to explain the processes of area change, from the perspectives of those involved. We asked three core questions in each area:

- how is the area changing, and over what time period have these changes been observed?
- are these changes interpreted as 'getting better' or 'getting worse'?
- how do people explain the changes that have occurred?

By combining these explanations with the statistical data, we have begun to answer some of the broad research questions set out in Figure 1, as well as to raise issues to be investigated more specifically in our second and subsequent rounds of interviews.

Throughout the study, we are supplementing the interview data with information from supporting documents such as housing strategies, regeneration programme bids, local authority community plans, residents surveys, economic development strategies and so on. In areas where there is a relevant local

newspaper, we are following press cuttings relating to the area. We have begun to develop a photographic record of each area and to map the provision of local facilities and services

Finally, in four of the areas, we are drawing on evidence from a parallel study, being conducted by Katharine Mumford and Helen Bowman in CASE, and funded by the ESRC and the Nuffield Foundation. They are conducting interviews with two hundred families (fifty in each area) every nine months, asking about their experiences of living in the area, their perceptions of change, and about their own experiences, individual responses and use of local services. This study started in 1999 and gives a unique insight into these neighbourhoods, through the eyes of people who live there.

Summary

The initial part of the study has achieved five things:

- Identified areas of concentrated social exclusion and described their distribution and characteristics
- Selected twelve areas for more detailed study, using criteria which enable us to compare different types of area and also to draw conclusions about areas of concentrated social exclusion in England and Wales more generally
- Established methods to monitor change and mechanisms for collecting and analysing the data
- Established a detailed understanding of the current position in these areas, as a baseline for monitoring future change
- Begun to understand and explain the processes of change and to answer the questions we set out in Figure 1

The remainder of this report concentrates on the baseline position in the twelve areas, as we found them in 1999.

Chapter 2: The Twelve Areas

This chapter provides an overview of our findings in the twelve areas. It summarises data from our more detailed area profiles, which are available separately. We look first at the location and type of area, and at their population mix. We then look at what they are like as places to live, at evidence of social exclusion, and finally at the various policy interventions aimed at tackling their problems.

Figure 8 provides a reference guide to the names of the selected areas and neighbourhoods in each Borough.

Figure 8: Reference Guide to Names of Areas and Neighbourhoods

BOROUGH	AREA	NEIGHBOURHOOD
Hackney	West-City	The Grove
Newham	East-Docks	Phoenix Rise
Knowsley	Overtown	Saints Walk
Nottingham	Riverlands	Rosehill
Newcastle	Shipview	Sunnybank
Sheffield	The Valley	East Rise
Blackburn	High Moor	Bridgefields
Birmingham	Middle Row	Broadways
Caerphilly	Fairfields	Valley Top
Redcar and Cleveland	Southside	Borough View
Leeds	Kirkside East	Southmead
Thanet	Beachville	Sandyton

Area 'Type': Location, Housing and Population Mix

Nine of the twelve areas are located within about six miles of the centre of a major conurbation. Of these:

- Five are in the inner urban core, on average about a mile from the central business district³. These are West-City (Hackney), East-Docks (Newham), Riverlands (Nottingham), The Valley (Sheffield) and Middle Row (Birmingham).
- Two are in the 'outer core', further from the city centre but within the city boundary: Shipview (Newcastle) and Kirkside East (Leeds).
- Two are in urban areas on the edge of major cities, although not within the city boundary (and local authority area) itself. These are Southside (which borders Middlesbrough) and Overtown (which borders Liverpool).

Of the other three areas, two (High Moor in Blackburn and Beachville in Thanet) are in medium sized towns, and one (Fairfields in Caerphilly) consists of a number of former mining villages in a Welsh valley.

Accessibility and transport were not raised as major problems in our interviews with residents or workers. This finding needs to be taken in context with others; the low rates of car ownership, high cost of public transport, and access problems for people with disabilities or young children. However, in four areas, at least some of the interviewees mentioned good transport links or access to the city as a strength. In only three were problems with access and transport mentioned. These were West-City in inner London, where most people depend on public transport but some neighbourhoods can be isolated because transport routes across the area east-west are poor even through north-south routes are excellent; Fairfields, the isolated valley town; and Overtown, the area of housing estates in Knowsley which, because of its location, has good east-west links in and out of Liverpool, but poor transport in other directions.

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³ East-Docks is an exception, being 6.5 miles from central London (Trafalgar Square), but matches the characteristics of the inner urban areas in other ways, and is very close to the Docklands business district. The additional distance reflects the size of London and its business district.

Table 3: Accessibility and Transport (1999)

	Distance from City Centre	Accessibility/ Transport raised as problem in interviews	Accessibility/ Transport raised as strength in interviews
Inner Core Areas			
West-City (Hackney)	2.5	✓	✓
East-Docks (Newham) ¹	6.5		
Riverlands (Nottingham)	<1		✓
The Valley (Sheffield)	1.5		✓
Middle Row (Birmingham)	1.5		
Outer Core and City-Edge Areas			
Overtown (Knowsley)	5.5	✓	
Shipview (Newcastle)	2.5		
Kirkside East (Leeds)	4		✓
Southside (Redcar and Cleveland)	2.5		
Other Areas			
High Moor (Blackburn)	N/A		
Fairfields (Caerphilly)	N/A	✓	
Beachville (Thanet)	N/A		

^{1.} Interviews conducted before extension of underground to this area

Source: Interviews and Visits in 12 Areas

Location is associated with other area characteristics: housing type and density, and population mix.

Areas in the inner core have a higher proportion of flats and three have some of the original Victorian red-brick terraces. As a result, they all contain neighbourhoods which have the impression of high density, with dwellings close to one another and a lack of open space. The outer core and city edge areas typically have consistently lower density housing, in spacious 1930s and 1940s estates. This is illustrated in Table 4 and by the photographs on the following pages.

INNER CORE AREAS



Hackney



Birmingham



Nottingham

INNER CORE AREAS



Sheffield



Newham

OUTER CORE AND CITY EDGE AREAS



Leeds



Newcastle

OUTER CORE AND CITY EDGE AREAS



Redcar and Cleveland



Knowsley

HOUSING IN THE OTHER (NON-CITY) AREAS



Caerphilly



Blackburn



Thanet

Table 4: Type and Tenure of Housing (1991)

	% purpose built flats	% Social Housing	Main Housing Types
Inner Core Areas	46	60	
West-City (Hackney)	83	74	1950s/1960s flatted estates
East-Docks (Newham)	53	68	1950s and 1960s houses and
, , ,			flats
Riverlands (Nottingham)	28	52	1970s flats and houses and older
			terraced stock
The Valley (Sheffield)	39	52	1970s flats and houses and older
	20		terraced stock
Middle Row (Birmingham)	29	55	1950s and 1960s flats and
	10	- 0	houses and older terraced stock
Outer Core and City-Edge Areas	19	58	
Overtown (Knowsley)	15	57	1930s and 1940s estates (houses)
Shipview (Newcastle)	28	61	1930s and 1940s estates (houses)
Kirkside East (Leeds)	24	70	1930s and 1940s estates (houses)
Southside (Redcar and Cleveland)	8	45	1930s and 1940s estates (houses)
			and older terraced stock
Other Areas	16	36	
High Moor (Blackburn)	21	53	1970s flats and houses and older terraced stock
Fairfields (Caerphilly)	11	38	1970s flats and houses and older terraced stock
Beachville (Thanet)	16	18	Large Victorian/Edwardian properties formerly used as hotels. Some older terraced stock and post 1950s Council estates

Source: 1991 Census and visits

The inner core areas also typically have more ethnically diverse populations, and a mixture of people, with professional city-dwellers and students alongside low income families, recent immigrants and refugees. Some have higher than average levels of transience. Outer core and city-edge areas are predominantly white, and relatively stable, as Table 5 shows.

Table 5: Population Characteristics by Type of Area (1991)

	% non white ethnic groups	% residents not at same address 1 year previously	% residents aged 18+ qualified to diploma level or above.	Households with children as % of all households	households with 4 or more children as % of all households with children
Inner Core Areas	32	10	7	32	10
West-City (Hackney)	28	8	12	27	7
East-Docks (Newham)	19	9	5	36	7
Riverlands (Nottingham)	19	15	8	26	8
The Valley (Sheffield)	26	11	7	27	10
Middle Row (Birmingham)	66	9	4	42	25
Outer Core and City-Edge	1.5	8	3	34	7
Areas					
Overtown (Knowsley)	1	6	3	38	8
Shipview (Newcastle)	1	9	3	29	5
Kirkside East (Leeds)	2 2	9	3 3 3	33	9
Southside (Redcar and	2	8	3	37	6
Cleveland)					
Other Areas	7	11	5	34	8
High Moor (Blackburn)	18	12	5	41	14
Fairfields (Caerphilly)	0	8	3	34	4
Beachville (Thanet)	2	14	7	27	5
England and Wales Average	5	9	13	30	5

Source: 1991 Census

There is only one area, Middle Row in Birmingham, which had a majority of non-white residents in 1991. The largest ethnic minority group there is Asian, mainly Pakistani and Bangladeshi. None of the other areas had more than 30% from ethnic minorities. High Moor's ethnic minority population is also mainly Asian, but other areas have a greater diversity of ethnic minority groups. The Valley in Sheffield, for example, has significant numbers of Afro-Caribbeans, Somalis and Yemenis, as well as Pakistanis and Bangladeshis. West-City has a sizeable Turkish/Kurdish community, among others.

Of the three areas that are not in major conurbations, Fairfields is similar in type to the outer-core areas; culturally homogenous and stable. High Moor and Beachville, being sizeable sections of smaller towns, have both neighbourhoods with the characteristics of inner-core areas and those with outer-core and city-edge characteristics.

Area Characteristics: What are the areas like as places to live?

Economic Characteristics

With the exception of Beachville, every area is in a major conurbation or in an area of established industrial decline. Beachville has suffered a more recent decline, since the mid 1980s, in its major

industry, tourism.

Our analysis of the changing industrial structure of the areas is still in progress. But the extent and

impact of industrial decline is evident from early qualitative and quantitative work.

Our interviews showed how industrial decline has had a powerful impact on the identity and social organisation of these areas as well as on economic opportunity, especially where they were dominated by one or a small handful of key industries. Eight areas traditionally had economies dominated by one or a few major industries, as shown in Table 6. In some cases, not only was the industry dominant generally in the city or region, but the area itself was closely linked to one employer. Southside grew up to serve the shipyard, steel and chemical works; Fairfields to serve the mines. Shipview directly overlooks the shipyard, East-Docks the docks. Overtown's nearby factories and the Liverpool docks employed the majority of workers there. The initial development of these areas occurred in an era of economic growth, when there was a demand for local labour, but some, such as Overtown, continued to grow even when their industries were beginning to decline in the 1960s and

1970s, as new housing estates were built to accommodate people from slum clearance areas.

In these kinds of areas, whose economic fortunes were strongly linked to one or a few major industries, many people we interviewed referred to the community impact of catastrophic job losses occurring over a relatively short period. In most cases, decline was evident by the 1960s, but the period of deepest impact was concentrated in the 1970s and 1980s. People spoke not only of the huge impact on family incomes, but on feelings of pride, identity, security and purpose both for older workers who lost their jobs, and younger generations. In some areas (most notably Fairfields in Caerphilly), the major employer also had an important role in other aspects of life, as a housing provider and organiser of social events and sporting activities. Majority participation at the same workplaces underpinned social activities, such as drinking after work in local pubs.

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Table 6: Traditional Dominance of a Few Key Industries

	Not Dominated by small number of industries	Dominated by a small number of industries		Industries in areas dominated by small number of industries				Interviews revealed strong collective memory of industrial decline		
			Engineering	Docks	Shipbuilding	Steel	Mining	Chemicals	Tourism	
West-City	√									
(Hackney) East-Docks		√		√						✓
(Newham)		•		•						•
Overtown		√	√	√						√
(Knowsley)										
Riverlands	√									
(Nottingham)										
Shipview		√	√		✓					✓
(Newcastle)										
The Valley		✓				✓				
(Sheffield)										
High Moor	✓									
(Blackburn)		✓	√							
Middle Row		_								
(Birmingham) Fairfields		✓	√				√			√
(Caerphilly)		,	*				•			•
Southside		√			√	✓		√		✓
(Redcar and										
Cleveland)										
Kirkside East	√									
(Leeds)										
Beachville		√							√	
(Thanet)										
TOTAL	4	8	4	2	2	2	1	1	1	

Source: Interviews and Visits in 12 Areas

In other areas, industrial decline seems to be less dominant in the collective memory. This is the case in the four areas where there had been a more mixed economy, with a variety of different manufacturing or trading activities. Women's employment was more established in the traditional employment pattern of these areas, which all featured textile and clothing industries, among others. It is also the case in Beachville (Thanet), where the main industry, tourism, depended on more small employers and on seasonal employment, and in areas where there had been significant population change; Middle Row (Birmingham) and the Valley (Sheffield). These latter two areas now have significant ethnic minority communities. The loss of major industries seems to have less impact on the

collective memory of these areas, than in areas like Shipview (Newcastle) where the white working class community has remained.

Some areas are located in boroughs which are now performing relatively well economically. Inner London, Leeds and Nottingham all saw net job growth between 1991 and 1996 (Turok and Edge 1999). The proportion of service sector jobs in these economies is now similar to the national average and they are benefiting from service sector growth. However others are doing less well. Of the cities, Sheffield, Newcastle and Birmingham all had net job losses during the 1990s. Birmingham, Redcar and Cleveland, Blackburn and Caerphilly all have significantly higher than average proportions of their workforce in manufacturing industry and are vulnerable to continuing manufacturing job losses.

Moreover, even in economies which are performing relatively well, the legacy of economic decline is taking time to overcome. All the boroughs have unemployment rates at least at the national average (some three times as high). Rates of economic activity are lower than average in every area except Leeds, as Table 7 shows. Knowsley, Hackney, Newham and Redcar and Cleveland have very low rates of economic activity and high rates of unemployment.

Table 7: Economic Activity and Unemployment

Area	% of working age	Unemployment Rate April
	population economically	2000
	active 1998	
Hackney	66.1	9.8
Newham	67.1	11.7
Knowsley	64.9	11.8
Nottingham	71.3	4.8
Newcastle	68.9	5.1
Sheffield	76.2	5.7
Blackburn	66.3	5.1
Birmingham	74.3	6.7
Caerphilly	73.3	6.4
Redcar and Cleveland	70.2	8.8
Leeds	81.2	3.8
Thanet	75.2	8.5
England and Wales	78.7	3.8

Source: Labour Force Survey and Claimant Unemployment Count (NOMIS)

Unemployment rate is number of people claiming Jobseekers Allowance as a % of workforce jobs.

We show later how sharply these borough-wide economic problems are felt in their least advantaged areas.

Housing

Social housing dominates most of the areas, as we illustrated in Table 4. Inner core areas typically have two types of social housing:

- 1950s and 1960s Council flats and maisonettes (in a variety of styles; high rise, deck access and lobby access walk up flats)
- 1970s Council estates, mainly family houses but built in high density estates with interlinking alleyways and communal open space.

The outer core and city edge areas are more likely to have 1930s and 1940s Council estates, mainly 2, 3 or 4 bedroomed family houses with gardens.

All the social housing areas suffer to some extent from poor stock condition or design. Most of the older estates require some modernisation or structural repairs. The most modern Council estates, built in the 1970s or even 1980s, have estate design problems. They were built on the Radburn design principle, with a separation of traffic and pedestrians. Neglected common space and poor visibility pedestrian alleyways contribute to fear of crime. Table 8 shows these problems.

Table 8: Problems With Council Housing Stock (1999)

Type of Housing	Number of areas with this type	Typical Problems with Housing	Typical Problems with Estate
1930s and 1940s Council estates	5	Generally soundly built but requiring some modernisation; central heating, new kitchens and bathrooms; new windows and doors	No major estate design problems. Narrow streets and parking problems. Ageing and decay of roads and pavements, walls and fences, kerbs and common green areas.
1950s and 1960s Council flats and maisonettes	3	Structural problems and need for some modernisation	No major estate design problems
1970s Council estates	4	Various problems: including timber frames which had not withstood the test of time, poor insulation and heating systems.	Estate design problems. Unsafe alleyways and passages. Too much communal space (uncared for). Lack of surveillance due to separation of pedestrians and traffic

Source: Interviews with housing managers

Note: Some areas have more than one type of housing

Housing stock problems are recognised and are being addressed. In addition to planned maintenance programmes, ten of the twelve neighbourhoods that we looked at more closely had either had major improvement programmes in the past, were undergoing them at present, or had them planned for the future. Most of these schemes were funded from additional funding sources; Estate Action, Priority Estates Project, Single Regeneration Budget, New Deal for Communities and Private Finance Initiatives, rather than from mainstream Council budgets. Neighbourhoods in Southside and in Overtown which had been recently improved had seen an increase in demand for homes (although only at the expense of unimproved neighbourhoods), and residents reported a greater inclination to 'take pride' in the area.

Our sample also includes areas of owner -occupation, and private renting. Naturally, in areas of this size, there are neighbourhoods of middle-income owner occupation, or in the London case, high income city dwellings. However, sizeable parts of Middle Row (in Birmingham), and Southside (in Redcar and Cleveland) are characterised by low income owner occupation and renting, mainly small pre-1919 terraced housing. Five other areas have small neighbourhoods like this. These neighbourhoods illuminate particular issues, different from those found in the more typical 'poor neighbourhood', the social housing estate. In the majority, the housing stock is in poor or very poor condition. There are numerous problems, including roofing, damp, old wiring, poor insulation and timber defects. These areas are seeing continuing deterioration of the stock because householders lack funds to maintain their homes. Various improvement schemes are underway. Those based on individual grant aid have been limited in their effectiveness, because low income householders are often unable to contribute. Block improvements have been more effective. In one case, Fairfields (in Caerphilly) there have been difficulties obtaining renewal area funding, because so many of the homes are owned outright, having been in families for years, but nevertheless owned by families on very low incomes.

The Physical Environment

Like housing, the condition of the physical environment varies between neighbourhoods. All the twelve areas have some neighbourhoods which are poorly maintained, derelict, run-down, or displaying severe problems of litter, graffiti or vandalism, but all also have well maintained and attractive parts. We looked closely at conditions in each of the neighbourhoods that we have chosen for more detailed study. From our own observations and interviews with residents, we identified six common problems: litter, dumped household rubbish and furniture, poorly maintained common areas and boundary walls and fences; derelict or boarded up buildings; graffiti and vandalism. Table 9 records these problems. Derelict buildings and dumped items were the most common. Naturally, all

of these problems vary from time to time, and the table simply records the position at the time of our fieldwork. There is necessarily some subjectivity about these judgements, and the table is designed to be indicative of the extent of neighbourhood problems rather a definitive measure of any one problem. We have tended to err on the side of caution.

What it does show is that very poor conditions do not seem to be an inevitable consequence of concentrated deprivation. Most neighbourhoods had two problems or fewer, and although residents here could pinpoint pockets of problems, conditions were generally regarded as satisfactory.

Table 9: Problems with Neighbourhood Conditions (1999)

	Derelict/Boarded Up Houses or shops	Dumped Household Items/Rubbish	Extensive Litter	Poorly maintained common areas, kerbs, verges and fences	Extensive graffiti	Extensive Vandalism	TOTAL
The Grove (Hackney)							0
Phoenix Rise (Newham)	✓						1
Rosehill (Nottingham)	\checkmark	\checkmark					2
East Rise (Sheffield)	\checkmark						1
Broadways (Birmingham)		✓	\checkmark				2
Saints Walk (Knowsley)	✓						1
Sunnybank (Newcastle)	\checkmark						1
Southmead (Leeds)	\checkmark	\checkmark	\checkmark	✓	✓	\checkmark	6
Borough View (Redcar	✓	\checkmark	✓	✓	✓	\checkmark	6
and Cleveland)							
Bridgefields (Blackburn)	√	√	√	√	√	√	6
Valley Top (Caerphilly)	\checkmark	✓		✓			3
Sandyton (Thanet)	✓						1
TOTAL	10	6	4	4	4	3	

Source: Observation and interviews with residents and front line staff

In three neighbourhoods conditions were very poor. These, Borough View (in Redcar and Cleveland), Southmead (in Leeds) and Bridgefields (in Blackburn) suffered all of the problems. Each of these neighbourhoods has experienced a cycle of decline in which increasing social problems and declining physical conditions have been closely intertwined.

Each of the three neighbourhoods has been relatively unpopular throughout its history but saw its reputation plummet rapidly after a period of severe anti-social and criminal behaviour, precipitated initially by a small number of households. These problems caused some residents to leave. The reputation of the neighbourhood deterred new residents and, because the supply of housing in these

boroughs exceeded the overall demand, enabling those with choice to live elsewhere, pockets of empty homes began to appear. Other homes were let to households who had little choice about where they lived. These included people who did not have a high priority for housing, such as single men, whose behaviour was anti-social or problematic for others (problem households), as well as households with practical or emotional difficulties to deal with, such as people fleeing violence or relationship breakdown (households with problems). Not all of these new households were problematic, but few played an active role in the neighbourhood and some had no intention of settling there. In Borough View, the problem was exacerbated by a rapid increase in the number of private landlords, as residents sold their homes to speculators, or rented them because they could not sell. These new landlords exercised little control over tenants.

Thus there was an increase in the number of residents likely to cause damage or decay to the physical environment at the same time as an increase in the number of vulnerable, isolated or transient residents, who lacked the confidence or commitment to protect the area. As conditions worsened, long standing residents began to feel that they could no longer enforce previously accepted norms. In Borough View, residents described how they became frightened to challenge neighbours over small breaches, such as dropping litter or damaging street furniture. Environmental services also came under extra pressure and began to perform less well. Extra litter pickers were employed but, nevertheless, the streets remain heavily littered. The declining physical appearance of the three neighbourhoods made them less attractive to newcomers and prompted some residents to move away, further weakening social control.

The evidence of these three neighbourhoods suggests that this cycle of decline has a long term impact on neighbourhood conditions as well as a short term one. Even in Bridgefields and Southmead where crime and anti-social behaviour has abated, the poor reputations of the areas, and the poor neighbourhood conditions, have remained.

However, evidence from two other neighbourhoods shows how 'protective factors' can be bolstered or restored, protecting the neighbourhood environment. Sunnybank (in Newcastle) is in danger of entering a similar cycle of decline, with a rapidly increasing heroin problem, increasing numbers of empty properties and a city-wide housing demand problem, and severe intimidation and anti-social behaviour in some parts of the estate. Residents have established regular meetings with the environmental services company, which has also recently carried out a survey and focus groups to pinpoint problems. Various problems with neighbourhood conditions are being tackled. For example, the Council is taking enforcement action against people who allow their gardens to become overgrown. The estate has recently been painted, and pavements and verges have been improved. This neighbourhood has no severe environmental problems apart from empty homes. Saints Walk in

Knowsley went into rapid decline in the mid 1990s, but order was restored by combined action of residents, police and housing. Residents told us that their confidence had been restored and that they now felt able to challenge neighbours who were allowing the neighbourhood to deteriorate.

Thus it appears that poor neighbourhood conditions are by no means an inevitable consequence of deprivation. Good neighbourhood management and strong social organisation can protect against the development of these problems. Once a neighbourhood starts to 'tip' into a cycle of decline, a rapid (and possibly sustained) deterioration in neighbourhood conditions is likely, but even in these cases, can be controlled with the right interventions and support.

Crime, Drugs and Social Order

In most cases, police have not been able to provide us with local crime figures in a format comparable with Borough or national averages⁴. However, interviews with residents and police gave an indication of crime problems in the areas. None of them are considered low-crime areas. Ten of the twelve are in police force areas which have higher than average crime rates, and all of the study areas were considered by police to have at least an average crime rate for the police force area. In seven areas, police did not consider that the area was any worse than other areas in the Borough with similar socioeconomic problems, but in five they did consider the study area to be a crime 'hotspot' relative to other areas.⁵ The main crime problems varied from area to area. Drug dealing and drug related crime were most commonly mentioned by police (in 8 of the 12 areas) as being among the area's main crime problems. Street crime, burglary, vehicle crime and disorder were all also commonly mentioned.

In no area did police observe rising overall levels of crime. In most, they said crime has been falling since the mid-1990s, in line with the trend nationally and in most police forces. At neighbourhood level, police identified specific initiatives which had contributed directly to reductions in crime: proactive, intelligence-led policing (3), joint work with housing departments (3), youth work (2) and target-hardening and surveillance measures such as gating and CCTV (2). Drugs and drug-related crime was the only problem that police identified as being generally on the increase.

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⁴ Crime data at beat or ward level is usually held on local systems for operational purposes and is not always collated in the same categories as force-wide crime data or counted according to Home Office Counting Rules. Although the data is not always comparable with national data, we do have raw numbers of crimes which can be tracked over time.

⁵ Police are usually referring to reported crime. It is widely acknowledged that a lower proportion of crime is reported in deprived neighbourhoods because of low insurance levels and fear of reprisals.

Interviews with residents showed that drugs and social order problems figured more highly on their list of concerns than other crimes such as house burglary, theft and vehicle crime. We interviewed residents in eleven of the twelve neighbourhoods⁶. In all eleven, residents were concerned about drug dealing and use. In ten, they complained about anti-social neighbours; constant disturbance, aggression or intimidation from anti-social residents and young people. These community safety issues arose much more often than complaints about housing, the physical environment or the availability or standard of local services, when we asked about the main problems of the areas. They fuelled anxiety and fear of crime even though recorded crime was diminishing.

Table 9: Problems Most Commonly Identified By Residents

Problem	Number of Areas where Problem
	Mentioned
Drugs	11
Anti-Social Residents	10
Youth Nuisance/Nothing for Young People	9
Crime/Anti-social behaviour	8
Loss of Community	7
Empty Homes	6
Stigma/Reputation	6

Source: Interviews in 12 areas

The impact of drug problems emerged very strongly from the interviews. In five areas, drug dealing was causing severe problems within particular neighbourhoods. These were Riverlands (Nottingham), Shipview (Newcastle), Overtown (Knowsley), The Valley (Sheffield) and Southside (Redcar and Cleveland). In these five, the pattern of drug market development is consistent. First, the problems are confined to certain neighbourhoods, rather than being spread over the areas as a whole. Second, there has been a rapid recent development in the size of the market and the type of drugs being sold. Established markets for cannabis, amphetamines and ecstasy were transformed in the mid-late 1990s with a renewed outbreak of heroin use. In some cases, the pace with which the problem accelerated was described by interviewees as an 'explosion'; in sharp contrast to the downward or sporadic trends in other crimes. Heroin is a growing problem. Its price is falling sharply, and it is sometimes offered free to attract new users. In neighbourhoods where heroin is cheaply and easily available, users get on to it early in their drug-taking careers. Heroin, sold in £5 or £10 bags, can be cheaper to use than alcohol (Graham, 2000).

The neighbourhood impact of the drug market in these five areas is profound. Problems relate to drug use and to dealing. Where there is widespread heroin use, residents complain of unpredictable,

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⁶ One neighbourhood consists primarily of B+B and hostel accommodation and it was not possible to access residents to interview

violent and anti-social behaviour by users, which is the main reason that the neighbourhoods feel so unsafe. Young people, particularly, commented on this. For example, in Borough View, young people told us that "there are smackheads everywhere and you have to have eyes in the back of your head.....". In Sunnybank, the heroin addicts were seen as ruining the estate "it would be a lovely place if you could get rid of all the smackheads". Residents noted that a lot of the theft and burglary was obviously drug-related; homes in drug dealing areas were regularly burgled and drug users were willing to sell valuable stolen goods way below their market price to get money quickly. Drugs detritus was also a concern. In Borough View, we spoke to residents who were moving because their children were coming across used needles in the street. Just before our visit, Council workmen had cleared a collection of needles (10-15 per drain) from the sewerage system.

Dealing also has an impact. Resident dealers can receive up to 100 visitors in a 24hour period. These 'comings and goings', some of them involving arguments and violence, cause disturbance to neighbours, and this is only part of the problem. Dealers establish a climate of intimidation and violence, to protect their business. Some parts of estates are 'no-go' areas, patrolled by minders who make unwanted visitors unwelcome. Young people are sucked in as runners, minders, or to 'look after' drugs for dealers, and are well rewarded with more cash than they could earn in work. People who contact the police are threatened. Some residents feel forced to leave. In Saints Walk, a quarter of the homes in one street were emptied over a period of about two years after a drug dealer established a reign of intimidation there to protect his business. A similar problem is developing in Sunnybank.

Police are well aware of the drug-dealing problems in all the areas and there are regular clamp-downs on street dealing and raids on domestic properties. However, these seem to make little long-impact on the overall problem. Drug dealing is well organised. Drugs are moved around in small quantities and difficult to find. Police activity is observed and avoided. Intimidation ensures that residents are reluctant to provide evidence. Expensive operations often yield little. For example, in Sunnybank, a major operation using roadblocks, helicopters and dogs resulted in only limited success and a resumption of market activity in different properties within weeks. In East Rise, in Sheffield, an operation which arrested twenty dealers only suppressed market activity for a month. The way in which police referred to the limited success of these initiatives contrasted with their enthusiastic reports of actions to reduce burglary or robbery. In only one of the study neighbourhoods, Saints Walk, had enforcement activity had a lasting impact. However, similar problems had arisen on neighbouring estates.

We are currently undertaking a more detailed study of drug markets in deprived neighbourhoods, for the Home Office, and undertaken jointly with the Criminal Policy Research Unit at South Bank University. We will revisit most of the twelve areas in this study, to examine how the drug problems have developed, their impact on the neighbourhoods and the success of strategies to tackle them. This study will report in summer 2001.

Facilities and services

The popular image of disadvantaged areas as isolated and bereft of facilities is not supported by our analysis, which suggests a more subtle picture. We looked at shops, private sector services, and public services, drawing on observations and interviews with residents and staff. The data is necessarily subjective and possibly incomplete; perceptions of services are influenced by the degree of contact, and by personal characteristics such as age, mobility, lifestyle and caring responsibilities. We have included data where there was consensus on it across a number of interviews. Overall, our interviews and observations suggest not that services and facilities are absent but that they are vulnerable and under pressure.

Shops have by no means disappeared completely. According to the residents we spoke to, most areas have some local shopping provision to cater for everyday needs. In certain areas, there was development in some sectors. For example, in East Docks and the Valley, residents commented on new shops selling specialist foodstuffs for ethnic minority communities, while in West-City, trendy new cafés and new shops were opening in one part of the area, while neighbourhood shops remained boarded up in others. However, shops struggle in most areas. Even where there is currently provision of basic shopping facilities, there are also significant numbers of boarded-up properties and a gradual decline in the number of units actually trading. The only real exception is Middle Row, which is on a busy main road and is a centre for Asian food and clothes shops and residents. Even in this area, there is evidence of decline at the margins of the area. In all areas, some shops have extremely limited stock, the price of goods is high, and some of the smaller neighbourhoods have no shops or post office. The evidence suggests that commercial services struggle to maintain viability in these areas, and that they only thrive when they can draw in people from other areas. It is notable that in three areas, new supermarket and shopping centre developments are in the pipeline, and that all these areas are positioned on 'through routes' to other areas.

Other private sector services also struggle to operate. In five areas, the lack of a bank or building society was specifically mentioned as a problem. It may be a problem in others – financial exclusion is an acknowledged problem in deprived areas (HM Treasury 1999). We also found that residents in low-income areas sometimes cannot access private sector services because of area stigma. Problems getting credit were mentioned in half the areas and seem to affect whole postcodes. Other problems

affect only certain streets and are more likely to mean that services are patchy than non-existent. For example, newspaper deliverers or taxi drivers sometimes refuse to go to certain streets, because of their violent reputation.

Table 11: Shops and Services

	Perceptio	Perceptions Arising from Interviews with Residents and Workers						
	Shops Boarded Up/Struggling\ declining	Problems because not enough Banks or Building Societies	Lack of youth and leisure Facilities	Lack of health facilities	Lack of/poor education services	Overall perception of relative level of public service provision		
West-City (Hackney)	√	√	√		√	Neglected		
East-Docks (Newham)	✓	✓	✓					
Riverlands (Nottingham)	✓	,	\checkmark	\checkmark	√			
The Valley (Sheffield)	✓	√			✓	Neglected		
Middle Row (Birmingham)		✓	✓					
Overtown (Knowsley)	√			✓				
Shipview (Newcastle)	√			\checkmark				
Kirkside East (Leeds)	✓					Favoured		
Southside (Redcar and	√		\checkmark					
Cleveland)								
High Moor (Blackburn)	✓					Favoured		
Fairfields (Caerphilly)	✓	✓	\checkmark	\checkmark		Neglected		
Beachville (Thanet)	✓							

Source: Interviews in 12 Areas

Demands on public services in these areas are very high. Interviews with public servants revealed some of the difficulties of operating in a disadvantaged neighbourhood; recruitment, retention and absence problems, high workloads, and problems created by the physical environment such as theft and vandalism. In some cases, services cannot meet demand, or alternatively (in the case of GP practices) are located in less demanding areas. Inevitably our interviews pinpointed some service deficiencies, most commonly youth and leisure facilities (5 areas), primary health care services (4 areas) and secondary school or post-16 education (3 areas). These were the views of the residents and do not necessarily reflect relative levels of service provision. Most areas have at least the investment in public service provision as other areas in the same cities, and usually more, because of needs-led or demand-based funding, a pattern also indicated by broader investigation of public spending in small areas (Bramley and Evans, 1998). Residents and workers in Kirkside East (Leeds) reported consistently higher investment than in other parts of the city, because of the political influence of local Councillors and MPs, and in High Moor (Blackburn), one particular neighbourhood has attracted funding for much better facilities and service because of its extreme problems and bad reputation. Only in three areas was there a strong sense among the residents we spoke to that the area was underresourced, overall, relative to its needs. In two (West-City and Fairfields), this was thought to be

because the political balance of power had long rested with Councillors from another part of the authority, and in one (the Valley in Sheffield) because the ethnic diversity of the area had counted against it in funding bids and in the ability to articulate cohesively the needs of the area. In all cases, these problems were recognised by representatives of the local authority, and the balance was now being redressed.

Social Organisation

In all of the twelve areas, there is evidence of strong social organization, exerting a positive influence on neighbourhood quality of life. We observed both formal community organizations and informal social networks, which are harder to detect through research of this nature, but which residents frequently allude to as being important.

Formal structures are well-established in the twelve areas, either in the form of tenants or residents organisations or broader regeneration organisations in which residents play a major role. We show this in Table 12. Four areas (Shipview, Fairfields, Kirkside East and Beachville) had fewer of these formal community involvement structures than the others, but this seemed more to reflect the style and activities of local government than any lack of community activism. The first three of these are traditional white working class communities with stable populations and paternalistic styles of local government. Although formal structures were lacking, all three areas had particularly extensive small-scale community involvement, such as clubs and activities run by residents. The level of activity and voluntary effort was commented on both by residents and workers. Mechanisms for involving residents in decision-making are now being developed in all three cases. Similarly, in Beachville, lack of organised community action across the areas reflects a lack of community development in the past. Such development is now a local priority: a community development project has been set up, working towards the establishment of a community development trust.

In all twelve areas, people spoke of the existence and importance of community spirit. Interviews with families revealed that perceptions of community spirit were broadly in line with the national average (Mumford, forthcoming). A strong emphasis on 'the people' and 'the community' as a major strength of the area came through in our interviews in over half the areas.

Table 12: Types of Formal Social Organisation (1999)

	Strong and Active Tenants/Resident Associations	Tenant Management Organisations	Community- initiated or community-led regeneration projects	Significant Community Involvement in major regeneration programmes (eg SRB/NDC)
West-City (Hackney)	✓			✓
East-Docks (Newham)	√	pursuing	✓ Conversion of church for community café, primary health care, and office space to generate funds for community projects	√
Riverlands (Nottingham)	√		✓ self-build community resource centre	√
The Valley (Sheffield)		pursuing	✓ community forum now established as trust	√
Middle Row (Birmingham)	√		✓ highly developed neighbourhood forum	√
Overtown (Knowsley)	√	pursuing	✓ resident-led organisation runs many regeneration projects	√
Shipview (Newcastle)	✓			
Kirkside East (Leeds)				
Southside (Redcar and Cleveland)	√	√	Community forum initiated regeneration bid and runs many projects	✓
High Moor (Blackburn)	✓	√		✓
Fairfields (Caerphilly)	√			
Beachville (Thanet)	√		✓ initiated local childcare/surestart partnership in one neighbourhood	
TOTAL	9	2 (+3)	7	8

However, in seven, including some of these, there was also a sense that the 'community' of past times had gone and that people no longer 'looked out for one another' in the same way. It seemed that there had been a change in the notion of 'community', over time. 'Community spirit' and 'community identity' take different forms in different circumstances. For example, in the four areas which had experienced the greatest problems with crime and disorder, residents spoke not of a loss of 'community' but of a smaller network of committed friends and neighbours who relied on each other more. In two areas with great ethnic diversity (The Valley and Middle Row), we were told that people tended to identify less with the area and 'the community' than with one of many faith or ethnic communities. In both of these areas, formal community representative structures (neighbourhood forums and inter-faith meetings) have been particularly important in bringing groups together to plan for the regeneration of the area.

Social organisation is also evident in other ways; through the myriad of voluntary groups and networks and social activities, through the existence of strong and stable family and kinship groups (mentioned in seven areas), through churches and faith groups which often have a central role in

bringing people together, and through informal systems of trading and earning. In many areas, interviewees described a widespread informal economy, with undeclared cash-in-hand work and trading in contraband goods, that enabled people to top up their incomes or to make their money go further.

Reputation and Popularity

Interviews with residents, housing managers and other professionals indicated that all of the study areas are relatively undesirable compared with the cities or boroughs in which they are located. Typically they have been unpopular for a long time because of their intrinsic characteristics; poor housing or environment, poor access to jobs or facilities, or industrial areas under the shadow of steelworks or slag heaps.

However, certain neighbourhoods within the study areas have worse reputations than others. This seems to apply to eight of our smaller neighbourhoods. The exceptions are The Grove (Hackney), Phoenix Rise (Newham) and Broadways (Birmingham), where we were not made aware of a strong hierarchy between neighbourhoods, and Saints Walk in Knowsley, which had had such a reputation but, following estate improvements and control of drug dealing, is now regarded as slightly more desirable than other neighbourhoods. In the other eight, a relatively poor reputation compared to other neighbourhoods in the area is a problem, although the study neighbourhood is not always the only one which is particularly unpopular. Often, several neighbourhoods have poorer reputations than the rest. In three cases, Bridgefields in Blackburn, Southmead in Leeds, and Rosehill in Nottingham, the neighbourhood's bad reputation has arisen as a result of a spate of problems that have now dissipated, but which live on in popular memory. Residents here regard the reputation of the area as undeserved, and fuelled by a headline-hungry media. As a resident in one area put it "its not as bad as folks paint it". In another, a 'Panorama' programme five years ago which portrayed drug dealing in the area still causes widespread anger and resentment for "dragging the area down".

The lingering and damaging effect of neighbourhood stigma has recently been reported by the Joseph Rowntree Foundation (Dean and Hastings 2000). Our interviews suggest that it impacts on neighbourhoods in three main ways. First it impacts directly on housing demand and empty homes. Of course, housing demand in the neighbourhoods is mainly driven by population trends and housing choice in the borough as a whole, which itself is influenced by wider regional and national trends (Rogers and Power 2000). For example, the two London neighbourhoods are not regarded as particularly popular but there is no difficulty letting homes because of the high level of pressure on the social housing stock. By contrast, none of the other neighbourhoods (outside London) actually has

a waiting list for Council property. In general, housing managers are able to let houses (although in some cases it takes months), but are finding it difficult or impossible to let flats and maisonettes, largely because of population loss, people's increasing preference for owner-occupation and the availability of relatively cheap alternatives in the private sector. Increased choice and reduced demand makes flats and maisonettes particularly hard to let, because houses are now available for people who would have had to take these properties in the past. Thus in East Rise (Sheffield) and Rosehill (Nottingham), there are extensive voids in certain blocks of flats, but not in the general stock. Managing an equilibrium between housing supply and demand borough-wide emerges as a critical issue for the fortunes of the least popular neighbourhoods, which feel the brunt of wider changes.

However, in this context, neighbourhood stigma has a compounding effect. In a situation of housing choice, residents of these neighbourhoods can exercise a choice to leave, not being replaced because no-one but the most needy will choose highly unpopular neighbourhoods. Large numbers of voids can develop, extending to all types of property (Power and Mumford 1999). This applies in four of our study neighbourhoods, as Table 13 shows. The number of empty properties in these neighbourhoods is estimated at between 10% and 40% of the stock. A closer look at these neighbourhoods is revealing.

Noticeably, these are outer core or city-edge areas. They are not cushioned from the fall in housing demand by a central city location. These are the four neighbourhoods that we identified as having severe problems with neighbourhood conditions. They have entered the cycle of decline which we described earlier. Conditions have worsened, people have left, there has been little demand for homes except among the most needy, some of whom have brought more problems, and so on. In two of the neighbourhoods (Borough View and Sunnybank) the increase in the number of empty properties is alarming. In Borough View, the number of empties doubled in the year before our visit; in Sunnybank, there was a 20% increase in six months. Demolition of the worst parts has not contained the problem. These neighbourhoods are beginning to be abandoned. However, in the other two, the position has stabilised. The severe problems of crime, drugs and anti-social behaviour have abated. Bridgefields is awaiting redevelopment and no homes are currently being re-let. Although the number of empty properties here is increasing gradually, there is no evidence of continuing abandonment. In Southmead, too, the number of empty properties is stable. In the context of wider housing choice, it is the continuing stigma of the neighbourhood that constrains new lettings. While existing residents have noticed the improvements in living conditions, the neighbourhood's poor reputation lingers with outsiders, not helped by the poor visual appearance, with boarded up properties and neglected common areas. As has happened in Saints Walk in Knowsley, (and indeed in one estate in Borough View) major improvements are needed to recast the image of the neighbourhood.

Table 13: Levels of Empty Property in Study Neighbourhoods (1999)

	None/isolated	Pockets affecting certain streets or property types (<10% overall but worse in parts)	Serious, extending to houses as well as flats (10%- 40% overall)
The Grove (Hackney)	√		
Phoenix Rise (Newham)	√		
Rosehill (Nottingham)		✓one block of flats/maisonettes	
East Rise (Sheffield)		√flats/maisonettes	
Broadways (Birmingham)	√		
Saints Walk (Knowsley)		√isolated streets	
Sunnybank (Newcastle)			√
Southmead (Leeds)			√
Borough View (Redcar and			√
Cleveland)			
Bridgefields (Blackburn)			✓
Valley Top (Caerphilly)		✓ scattered, mainly flats/maisonettes	
Sandyton (Thanet)	Not including in	table because homes are mainly HMOs o	r hostels
TOTAL	3	4	4

Source: Interviews with Housing Managers

Secondly, stigma has practical effects on residents. We did not test these systematically, but have recorded what residents told us, unprompted, about their experiences. In several areas, residents revealed that they were unable to get credit to buy household goods or purchase items from catalogues. Some younger people thought that they would be discriminated against in the job market, and there is some evidence that this is the case. In Bridgefields (Blackburn), an employers' forum had set up links with the estate specifically because employers said they were reluctant to take on any local people. In Broadways (Birmingham) the neighbourhood forum had made dummy job applications to a range of large employers, and found less success with applications carrying the neighbourhood address rather than one from a more affluent area.

Thirdly, there is an impact on confidence and self-esteem. Residents are deeply conscious that people from outside the area look down on them because of their address. One resident said "I've heard people from outside the estate say " am I safe to bring my car on?" or "why don't they just put a wall round it and call it x penitentiary " (Bridgefields) and another, in Broadways, said that her daughter was at school in another part of the city and that her friends weren't allowed to come and visit her in the area. Living in these neighbourhoods can be an additional burden to residents because of other people's attitude to them.

Chapter 3: Evidence of Social Exclusion

Thus far, we have discussed features of the areas; their economic structure, housing and neighbourhood conditions, social organisation and reputation. Chapter 2 has shown how the areas have been disadvantaged by poor housing stock, economic decline and poor neighbourhood conditions. Such problems impact directly on residents, for example on job prospects or fear of crime. They have also rendered the areas relatively unpopular compared with the areas around them, such that over time they tend to attract residents who are disadvantaged, while more advantaged residents opt to live elsewhere. Thus disadvantaged areas have high concentrations of people who are vulnerable to social exclusion. The Breadline Britain Index produced in 1990 suggested that most wards in our study areas had between 35% and 45% of households 'deprived'⁷. The difficulties faced by these households are not unique to our study areas; they reflect broader problems of social exclusion in society as a whole but, because they are concentrated, they are vital to area fortunes as well as to individual ones. As one interviewee told us "you're not going to regenerate the area unless you can regenerate the people".

Four aspects of social exclusion emerged from our interviews. These are discussed in turn:

- barriers to workforce participation and disengagement from work and education
- health problems, including mental health problems and low mental well-being
- a sense of powerlessness
- early childhood disadvantage

These were issues that emerged in the less structured part of our interviews, when we asked respondents about problems in the areas or about the work that their own agencies were doing. Unlike the questions on area characteristics, we did not investigate these aspects of social exclusion systematically or fully in each area. For this reason, we do not compare areas in this section. Rather, this is a qualitative illustration of problems that were generally found.

Barriers to workforce participation and disengagement from education and work

As we have already indicated, these are all areas with high unemployment and high rates of economic inactivity. In two areas, more people were actually claiming Incapacity Benefit in 1998 than were claiming Job Seekers Allowance. They are all areas where low skilled work predominated in the past.

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⁷ We will also be analysing two new indices produced in 2000 (the Index of Multiple Deprivation and Poverty and Social Exclusion in Britain)

The quantitative and qualitative evidence we collected suggests that there are still much lower levels of skills and educational participation than the national average, and that a minority of people are effectively disengaged from the labour market because there are too many barriers to overcome or because there are more rewarding alternatives.

Levels of skills and attainment in the areas are very much lower than average. A survey for the Basic Skills Agency in 1995 found 15% of the population with low or very low literacy⁸. In the wards matching our study areas, the proportion was much higher; in one case twice as high. In half of them, more than 25% of the population has low or very low literacy (see Figure 9). This is increasingly being recognised as a major problem. The influential 'Moser report' showed that people who only have entry level skills⁹ can only access about 50% of jobs, while those who are below entry level can only hope to access 2%. (Moser 1999).

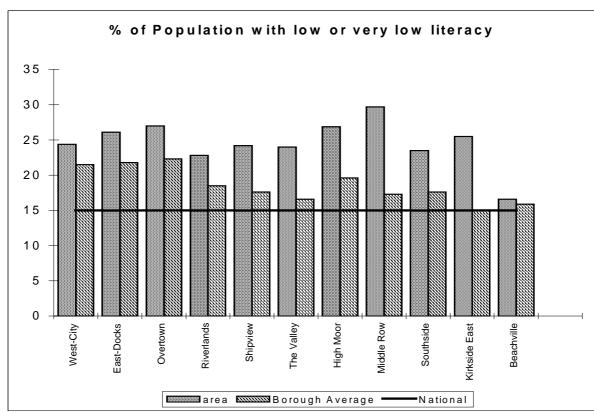


Figure 9: Levels of Basic Literacy Skills (1995)

Source: Basic Skills Agency

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⁸ Further research in 1997 estimated the figure at 19% (6% with very low skills and 13% with low skills), but ward-level comparisons are not available for this data.

⁹ Entry level skill is the same as 'low' literacy. It is the level expected at age 7. People with entry level literacy could pick out items from a list or guide and read a short simple article in a tabloid newspaper.

Attainment at school is also low. None of the schools serving our study neighbourhoods achieves the national average GCSE pass rate (five grades A*-C). On average, the rate for these schools is 21% compared with 47.9% nationally (1999 data). On average, 11% of pupils leaves with no GCSEs, double the national average. In some schools in the sample, one in five pupils leaves with no GCSEs.

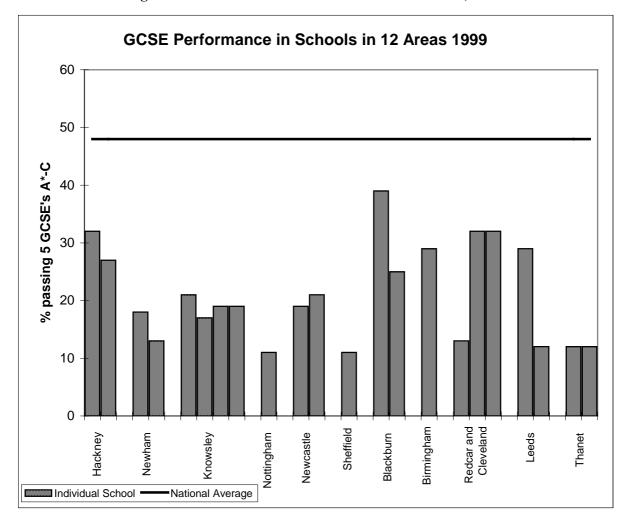


Figure 10: GCSE Performance in Schools in 12 Areas, 1999

Headteachers and other interviewees reported that one of the reasons for low attainment is that education has a low perceived value locally. This view was expressed particularly in white working class areas ¹⁰. One headteacher remarked that "the school suffers from perceptions of what school is all about" and another that:

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¹⁰ Low parental involvement was often interpreted as lack of interest, although lack of confidence or skills may also be factors. Lareau has demonstrated that even among parents who place a high value on education, working class parents often have a different perception of their role in the educational process than middle class parents. Participation tends to be lower and qualitatively different (Lareau 1989)

"The children are very wary of being seen as participating in education outside school. In the first year I was here, only half a dozen children brought a bag to school. You wouldn't want to be seen bringing a bag because that implied you took work home with you."

Most schools in our study areas have high rates of absence. On average, 13% of half day sessions are missed, compared with 8.7% nationally. The biggest difference is in unauthorised absence (truancy), where three times as many days are lost (3% compared with 1%). Headteachers in the study schools report that low attendance is one of the biggest barriers to improving attainment. Evidence from the Youth Cohort Study supports this. 38% of persistent truants failed to get any GCSEs, compared with 3% of non-truants. (Bosworth 1994). Some heads felt that absence was often overlooked by parents and that some parents actively supported absence, keeping children off school for holidays, to baby-sit for younger children, to accompany them on shopping trips or to celebrate birthdays.

"Some parents in the area do not see that education matters. There is a very high level of condoned absence. For example, I spoke to one parent and said 'did you know that your son's attendance this year has been 70%?' and he said 'oh, that's quite good, isn't it?'"

Lower participation continues after compulsory school leaving age. The 1991 Census showed that just over half of 16-18 year-olds (53%) were in full-time education. All of the study areas had lower participation rates – on average 41%. A recent investigation of attitudes to adult education and training in one of our areas showed that many people are suspicious of the role of education in getting employment, because of their own experiences of doing work which does not require training, or of arbitrary and discriminatory employment practices. An instrumental view of education as a means to occupational enhancement is not always shared by people in areas where the job market rejects or marginalises them (Bowman, Burden and Konrad, 2000).

If worthwhile jobs in the formal economy are perceived as difficult to obtain, other alternatives, outside the formal labour market, become realistic options (Macaskill, 2000, McKenna 2000). Our fieldwork suggests that there are several such alternatives, which are of varying prevalence, and impossible to quantify, in the different areas.

These alternatives are:

- Undeclared cash-in-hand work, such as labouring, cleaning, driving or café and restaurant work, usually irregular and varied
- trading contraband cigarettes and alcohol
- dealing in stolen cars or other goods
- dealing in drugs.

As we have suggested, informal economic activities such as cash-in-hand work or buying contraband goods are widespread, and to a certain extent, underpin the economic life of the areas. For a minority of people, they are a full-time alternative to formal work. In several areas, the Employment Service attributes part of the decline in unemployment to the disappearance from the register of people who have alternative incomes and who do not wish to participate in welfare to work schemes.

Employment advisers also noted that many people who are not working have complex problems that prevent entry to the labour market, including mental health or addiction problems. Intensive and sustained interventions are necessary to re-engage such people with formal work.

Health Problems

Poor health is a feature in all the areas. All are in parliamentary constituencies which have premature mortality rates (Under 65) in the top third in Britain. Half of them are in the worst fifth. (Shaw et al. 1999). On average, 9.3% of babies in the study areas were born at low weight (less than 2500g), compared with 7.8% nationally. Yet even among these twelve areas, variations in health are striking; the death rate in the worst area is one and a half times that of the best. The areas with the worst mortality rates are mainly the inner city ones.

Previous studies have shown that variations in health are particularly marked at neighbourhood level (Townsend et al ,1988). Data is not routinely collected at this level. The evidence we were able to collect suggests that most neighbourhoods have much worse health than the national average. For example, the ward which contains Phoenix Rise in Newham had an SMR of 142, the one corresponding most closely to Saints Walk in Knowsley 145 and the one containing Borough View in Redcar and Cleveland 132, whereas the one containing Rosehill in Nottingham had an SMR of 103, only just above the national average. This suggests that local factors are important, either because certain disadvantaged neighbourhoods draw in people with very poor health because of their housing

type or reputation, or because the neighbourhood itself may have an adverse effect on the health of its residents.

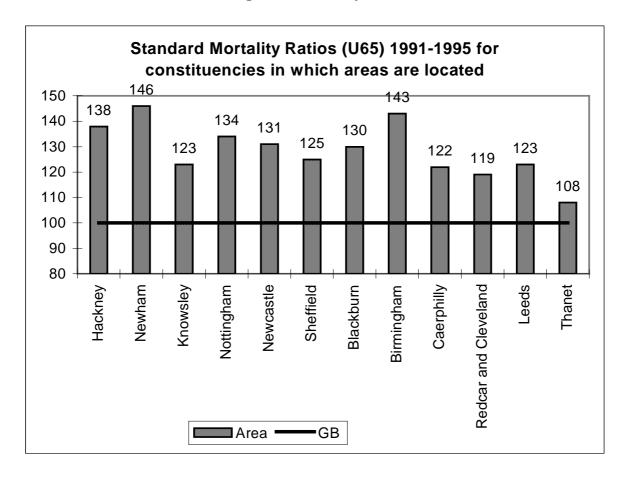


Figure 11: Mortality Ratios

We explored the nature of health problems through interviews with GPs and other health professionals in eight areas. They identified a common set of health problems: cardiovascular problems (8), mental illness (7), and lung disease, particularly lung cancer (6).

Table 14: Health Problems Most Commonly Identified By GPs (1999)

Problem	Number of Areas
	where Problem
	Mentioned (out of 8)
Cardiovascular problems	8
Mental Illness	7
Lung Disease	7

Source: Interviews in 12 Areas

Less often, but still commonly mentioned, were diabetes, teenage pregnancy, low birth weight babies and infant mortality, health problems of isolated older people, asthma, obesity, domestic violence and a high prevalence of minor ailments, such as minor infections, frequent accidents, coughs, colds,

headaches and general malaise. Inevitably, GPs are more likely to base their comments on the cases they see most often, which are by definition the more problematic ones. However, their observations were often substantiated by other interviewees. Teachers, in particular, mentioned that some children were tired, poorly nourished, or depressed, and that there were many colds, flus and other minor ailments.

With the exception of specific illnesses related to particular occupations or ethnic groups, most common physical health problems were attributed to lifestyle factors. Respondents spoke about lack of access to affordable nutritious food, but also about a widespread lack of knowledge and interest in healthy living. As one health visitor put it "the biggest health issue here is that health isn't an issue". Although GP consultation rates are higher, health professionals told us that take up of preventative measures (such as immunisation, children's health checks, family planning, smear tests), tends to be lower than in other areas. Poor nutrition arose as an issue in every area; drug abuse in seven of the eight, alcohol in five and smoking in four. If anything, the health professionals we interviewed thought that these problems were getting worse rather than better. Interventions with the younger generation were seen as critical to breaking a cycle of poor health.

"they are already more obese, smoking, experiencing drug abuse, eating more badly than their parents – so things can only get worse".

"Take diet; local people need access to good healthy food but they also need to know what to do with it. Many young mothers don't know. If you've grown up on pie and chips and cans of coke what do you feed your children on?"

Mental ill-health was raised in the interviews as regularly as physical ill-health. Two distinct issues were raised. The first is that some areas have concentrations of people with severe mental illness. In inner East London, the proportion of schizophrenics registered with GPs is four times the national average. In Nottingham, mental health services have estimated that 50% of the city's schizophrenics live in Riverlands. Inner city areas like Riverlands attract people with mental illness both because they have easily available single person accommodation, and because hostel accommodation is located there, where land and rents are cheaper, there is less local opposition and residents can be close to city centre support services. Quite apart from the difficulties such people may face because of their health problems (probably compounded by living in difficult areas) they can also have an impact on the area. Unpredictable, unusual or noisy behaviour can disturb other residents or contribute to feelings of insecurity. For example, a resident in The Grove described living next door to a mentally ill neighbour who shouts and screams all night, and children at a youth club in Riverlands said fear of all the 'loonies' was one of the worst things about the area. Housing managers told us that people

with mental health problems who are not receiving enough support were at risk of getting behind with their rent, or being unable to cope with some aspects of living independently, like making sure that property problems are reported and repaired. Such concentrations of people with mental health problems were confined to the inner city areas, and to Beachville. They appear to arise through various mechanisms: the concentration of supported accommodation in these areas; the closure of long-stay institutions; the availability of accommodation (especially flats and bedsits) and their allocation to people who are in priority need; and the fact that these areas also draw in groups of people among whom mental health problems are common; for example, people who are homeless or who abuse drugs or alcohol. We have returned to two of the inner city areas (The Valley in Sheffield and Riverlands in Nottingham) to explore these issues in more detail and will report on these case studies in early 2001.

The second mental health issue is widespread depression. One GP said that the most common health problem in the area was "above all, depression. Deep unhappiness. I would say at least 60% of all the visits are about mental health. Then alcoholism. Then drug use and domestic violence. Social isolation and loneliness." Another said that "people's inability to cope with life is the main problem.... many people suffer from chronic depression. They start in at their children; they give in to them. Its difficult to know what to do – there is nothing you can do about it". One volunteer community activist told us that her entire committee "was on nerve pills". The problem was described in some areas as 'a lack of mental well-being'; stress, anxiety, and loss of self esteem, rather than a specific mental illness. Six reasons were commonly given for this problem:

- Psychologically damaging experiences, such as relationship breakdown, homelessness or abuse
- Benefit dependency; being reliant on official decisions and administration for basic income.
- Financial stress and debt
- Worklessness; lack of status in other people's eyes, lack of opportunity to gain confidence from learning or exercising skills, or from feedback from colleagues
- The strain of living on a low income, having less choice over everyday things
- Negative messages conveyed by constant bad press about the area and its residents, by the reaction to telling people one's address, by the depleted environment and services in the area

These are problems of poverty, which will be less prevalent in more affluent areas. Obviously, not all will apply in every case. CASE's parallel study, interviewing families in four of the areas, is also demonstrating how personal characteristics and access to support networks and resources can mitigate their effect.

Low self esteem emerged as a particularly important issue, and one which was a barrier to accessing new opportunities. Table 15 shows some examples. We encountered many projects which aimed directly to build people's confidence as a pre-requisite to any other outcome (such as work, training or lifestyle changes) being achieved. The critical importance of this approach in tackling social exclusion was emphasised to us time and time again.

Table 15: Examples of Low Self-Esteem and Its Impact

Support Service Providing Evidence	Examples of How Low Self Esteem Contributes to Social Exclusion
Further Education College (Hackney)	 Residents who will attend classes to learn practical skills but not English, maths or computing because this seems like school. Lack confidence in academic abilities. Residents who will undertake courses in community halls but not come to new college building. Only comfortable in a familiar environment
Family Support (Newcastle)	 Mother too frightened of 'authority figures' to bring her children to nursery school Father reluctant to try to help children to read because own reading poor.
Community Project (Sheffield)	- Woman with no employment history or qualifications. Started to help in community café and wanted to gain catering qualifications, but lacked confidence to go to training college. Only able to complete training because trainer agreed to assess and train on site.
Primary School (Leeds)	- Unemployed parent. Aggressive relationship with child who displayed educational and behavioural problems. Father got job and grew in confidence himself. Relationship with child improved. Child started to do better in school.

Source: Interviews in study neighbourhoods 1999

A Sense of Powerlessness

Closely linked to the problem of low self esteem is a sense among area residents that they lack choice, control and power. This is a circular relationship. People who lack self-esteem are less likely to be able to exercise power, and lack of power contributes to a sense of low self-efficacy and esteem. One interview suggested that this was the key to understanding other outcomes, such as health:

"people live shorter and more unhealthy lives in places like (x estate). Levels of self-worth and self-esteem are low, so people do not look after their health. They have no control over their own lives or their environment. It is all about choice, but they do not have that – so, heart disease and cancer are high because no-one takes control of their lives. Social exclusion is all about choice."

Health Action Zone Project Manager

Respondents suggested that a sense of powerlessness relates both to individual circumstances and to neighbourhood conditions. In practice, many people in the study areas, constrained by low income, do have limited choices, over housing, work, leisure, shopping and services. Our interviews did not focus on these issues. We did, however, collect evidence that residents felt powerless over neighbourhood conditions. The pressure of difficult neighbourhood conditions and the concentration of problems bears heavily on resident activists who are trying to effect change. There were three main complaints. Firstly, in six areas, residents felt that their area had, in general, been allowed to run down, sometimes for political reasons. Secondly and more specifically, in eight areas residents were frustrated about their inability to shape decisions about their own area. There were specific examples: drug problems and empty houses in Sunnybank (Newcastle), the redevelopment in Bridgefields (Blackburn) and the redesign of the town centre in Valley Top (Fairfields), but residents also made general comments about the fact that decisions were beyond their influence, made by people from outside the area and without any consultation.

"the estate is running on empty promises. They come down here, write it all down, and just walk out of the door and take it all away with them. It is like nothing was ever said"

"the Council always looks at why things can't be done rather than how they could be done...at the moment, no-one would ask for nothing because they know there's no point"

"tenants weren't asked about what kind of services they needed – the things were provided rather than owned by us. It all adds to the attitude that you can't do anything for yourself"

"faceless people down the valley are deciding what's going to happen here without asking us...we're putting petitions out but why should we have to battle with the people who are representing us?"

"people have had so any promises and seen nothing done. If someone from the Council came round (x estate) and said they were giving out gold ingots no-one would bat an eyelid."

Thirdly, in four areas, resident activists made the point that their contributions were, in general, undervalued, and that they held little power in supposed partnership arrangements.

"no-one listens to us... you get respect when you're a paid worker. When they realise we're truly voluntary, we're contemptible. They can say – don't worry about them – they're not paid"

"at the moment, the tenants are the lower end of the partnership"

Many regeneration and community regeneration workers stressed that residents had to have more real power in decision-making if the areas were to be successfully regenerated, not only to ensure that the right decisions were made, but to restore a sense of ownership, choice and control. The key was "value people – for what they are not what they do". Several local authorities are making moves towards more community involvement and devolved decision-making, but at this stage, the only examples in these areas of residents having a genuine share in decision-making were in special regeneration programmes, rather than in mainstream activity.

Early Childhood Disadvantage

In all of the areas, at least some of the respondents referred to early childhood disadvantage associated with parenting difficulties and with fragmented or reconstituted families. The extent of these problems is difficult to assess; professional workers tend to emphasise the small number of very problematic cases which take up much of their time, rather than the majority of households with no difficulties. However, our interviews with primary school headteachers, family support and social workers, health visitors and residents at least indicate the kind of problems that are encountered in these areas.

Evidence of early childhood disadvantage came mainly from primary school teachers, who reported low levels of reading, speaking and listening skills on entry to school, as well as a lack of social skills – being able to play and work together - and developmental skills like using the toilet or eating unassisted. Several interviewees also suggested that behavioural problems among young children were increasing, because children lacked the social and communication skills to resolve problems and responded aggressively or defensively because this was the nature of their relationships at home. Some said that children had one set of rules at home and another at school. In ten out of the twelve areas, respondents made specific reference to poor health in young children or to under-nourishment. Headteachers were aware of many children turning up to school with no breakfast, and of a staple diet of coke, crisps and convenience foods. In a minority of cases, problems went deeper; failure to provide toothbrushes at home, to take children to the doctor or to apply medication.

Interviewees suggested that some of the difficulties young children faced were the direct effect of low income, as parents had limited resources and opportunities to offer. However, they were more likely to allude to the indirect effects of disadvantage. Teachers referred to parents who lacked the knowledge or confidence to help with their children's education. They also illustrated how the high levels of stress and depression faced by young parents living on low incomes and in difficult circumstances can translate into aggressive relationships with children and affects parents' confidence and their interactions with support agencies.

"Some families here are so isolated and frightened. Some aren't even confident enough to bring their own children to nursery school. To encourage them to come I have to meet them at the school gate. So much needs to be done to raise parent's self esteem....... to help them to build more loving relationships with their kids. For example, there's one parent in the group who can't read, and couldn't share in his children's reading – so I encouraged him just to spend time with the kids going through books and talking with them about the pictures. Other times its practical problems that they don't know how to deal with, so we talk to the parents about how to deal with sleeping problems, bed wetting, things like that." (Family Support Worker)

"the vast majority of parents have a verbally aggressive, negative relationship with their children. They have so few positive relationships themselves, and this translates to the relationships they have with the child. Its how you feel about yourself that matters. The other day I heard one mum saying to another "our so and so (who is 3), I'm really sick of her. She's really playing up and won't do anything I tell her. Anyway, I'm teaching her a lesson. I'm not speaking to her at all, just totally ignoring her." (Primary Headteacher)

"(for some children) at home they're not spoken to; they're told to shut up; the TV is on all day so they have no listening skills; they're not taken out to supermarkets because they have tantrums so they don't get to see words on labels; those children are at a severe disadvantage" (Nursery School Headteacher)

Census data showed that the proportion of households with children headed by a lone parent was much higher than average in these areas (an average of 27% of households compared with 12% nationally). Lone parents in the study areas were also more likely to be young (under 24) than in other areas.

Table 16: Lone Parents

	Lone Parent Households as % of All Households with Children	Lone parents aged 16-24 as % of all lone parents
West-City (Hackney)	32	13
East-Docks (Newham)	33	24
Overtown (Knowsley)	33	25
Riverlands (Nottingham)	34	29
Shipview (Newcastle)	24	25
The Valley (Sheffield)	26	28
High Moor (Blackburn)	27	34
Middle Row (Birmingham)	22	20
Fairfields (Caerphilly)	17	34
Southside (Redcar and Cleveland)	22	32
Kirkside East (Leeds)	27	28
Beachville (Thanet)	21	27
ENGLAND and WALES	12	18

Source 1991 Census

Some interviewees thought that parenting knowledge had been lost through several successive generations of very young parents. Others pointed to problems for children of young or lone parents not so much in terms of a lack of knowledge and skill in parenting, but in terms of the difficult practical and emotional problems that some such parents face. Some parents have a series of broken relationships or fragmented family structures with several children by different partners, absent or intermittently absent partners. This may cause direct difficulties for children, such as not being able to identify with a consistent and stable role model, or witnessing upset and arguments at home, but it can also cause depression and anger for parents affecting the consistency of their support for their children.

"you see a lot of fractured families. And parenting problems. Their own needs are very high, so they lack the time and motivation for their children. Also, in many cases their own parenting was bad so they don't understand their kids needs "(Health Visitor)

"family instability gets passed down through the generations.... There always were a lot of rows and divorces but even more so now. There is no stability or constant care for the children and you can see it in their uncertainty and aggression" (Family Centre Worker)

"the problems here aren't about physical things – they've got more to do with the breakdown of relationships, particularly family. Some of the single mums are so hurt about how they've been treated by people they've trusted. They've lots all faith in the prospects of long term relationships" (Vicar)

For all of these reasons, an increase in family support services was seen as an essential step in breaking the cycle of deprivation in these areas.

Policy Interventions

None of the problems we have discussed in this chapter go unrecognised. There is a vast range of initiatives at local and central government level, aimed at their alleviation. At this baseline stage, we simply noted the presence of major interventions which might have an impact: area management and governance, area-based regeneration programmes, and other special funding programmes and initiatives. Later stages of the research will explore these more closely and assess their impact.

Area Management and Governance

We have looked at the extent to which local government structures enable co-ordinated planning, resource allocation and day-to-day service management at area level. There are a variety of mechanisms:

- area based management
- inter-agency planning or liaison groups at local level
- devolved local authority decision-making and area planning
- forums for regular public consultation
- neighbourhood management
- integrated service delivery through one-stop-shops.

Table 17 summarises these findings. There is a great disparity between the areas, but also much change. Five of the local authorities have made significant recent moves in the direction of devolved decision-making or area-based management. The requirement for greater public consultation and community planning under the Local Government Act is likely to precipitate further moves in this direction.

Lack of co-terminosity in boundaries between local authorities, health services and the police, and between local authority departments, inhibits area-based working in every case, and particularly in the one area which has a two-tier local government structure. In some agencies, moves are being made to greater co-terminosity. The most advanced example was in Sheffield, where both the Council and Sheffield Health work on the same 'Action Areas', and all Council departments have a named liaison

officer for each area. This was the only example of a structure for area-based inter-agency working outside of the groups set up to plan and implement regeneration programmes. It is generally acknowledged that one of the main benefits of special funding programmes is that they are the catalyst for better inter-agency working (Smith,1999). It remains to be seen whether such models can be sustained without the carrot of special funding. According to interviewees, day-to-day, multi-agency working appeared most effective in the smaller towns, where organisations were smaller and staff tended to stay in post for longer, and most difficult in the larger cities.

On the other hand, it is the large authorities that are developing structures for devolved governance. Six areas (including all the major cities) have area committees or member panels for planning and consultation. Four have dedicated co-ordinator posts to support this structure. Interviewees suggested that the presence of such staff also greatly facilitates inter-agency working. Three local authorities allocate area responsibility to senior Council officers, with these officers acting as 'champions' for the area. Devolved decision-making is not necessarily supported by structures for regular public consultation. Five areas had regular, structured and influential area, community or neighbourhood forums. Some of these were elected bodies, while others were open forums.

The last year has seen increasing support in policy-making circles for the idea of neighbourhood management. Only one of our areas, Riverlands in Nottingham, has a neighbourhood manager, working to a neighbourhood board. The post has been developed in conjunction with an estate regeneration scheme, but is seen as a potential model for other areas. Newcastle City Council has recently restructured to create area-based 'community and housing managers', but these posts do not yet fit within a community consultation or multi-agency structure.

Finally, we found that two areas had recently developed 'one-stop shops' for integrated service delivery. Both of these also incorporate primary health care services as well as Council services. In one case, Leeds, reception staff were trained to deal with initial enquiries across three services; housing, benefits and social services.

Table 17: Local Governance and Management Initiatives (1999)

Area	Area Committees (with co- ordinator)	Area Responsibilit ies for senior Officers	Area Forums	One Stop Shops	Neighbourhood Manager
West-City (Hackney)	✓	✓			
East-Docks (Newham)			✓		
Overtown (Knowsley)				✓	
Riverlands (Nottingham)	$\checkmark(\checkmark)$		✓		✓
Shipview (Newcastle)	$\checkmark(\checkmark)$				
The Valley (Sheffield)	√(√)	✓	✓		
High Moor (Blackburn)					
Middle Row (Birmingham)	✓				
Fairfields (Caerphilly)		✓			
Southside (Redcar and C)			✓		
Kirkside East (Leeds)	√(√)		✓	✓	
Beachville (Thanet)					
TOTAL	6 (4)	3	5	2	1

Area-Based Regeneration Programmes

Seven of the twelve areas are currently the subject of a major, government-funded, area-based regeneration scheme. Of these, three have New Deal for Communities funding and five have Single Regeneration Budget (SRB) funding. One has both.

All of the remaining areas also have some current regeneration funding. Four are included in smaller thematic SRB programmes which usually cover a wider area. Unlike the major area-based schemes, these do not involve major physical investment; they focus on building capacity or linking local people to employment. Similarly, the Welsh area has an area-based programme funded by the National Assembly for Wales, which incorporates New Deal for Communities' principles of multiagency planning and community involvement, but does not provide substantial sums for physical improvement. In contrast, two areas have comprehensive Council-funded estate regeneration schemes covering just one neighbourhood, in which housing redevelopment is the main component. The schemes also involve local co-ordinators and community-led groups developing plans for social and economic regeneration.

We have collected data about the aims, funding and spending programmes of these initiatives, their decision-making structures and processes, and their links to statutory bodies, community and local democracy. We have gained feedback from residents (especially in areas where our interviews with families are taking place) about the programmes and their impact. Responses to these programmes vary widely, from "we've seen it all before" to optimism about real change. They will form the

subject of a specific report during 2001/2, in which we will also look at European-funded programmes, which we have not covered here.

Special Projects, Initiatives and Programmes

In addition to these area-based regeneration programmes, all of the areas except Fairfields (because it is in Wales) are included in at least one of the government's area-based programmes to improve health and education and to support families.

Nine are included in Health Action Zones. In most cases, these appear to be having relatively little short-term impact on health programmes and services at area level. Their funding covers much broader areas and most HAZs have not targeted deprived areas with tailored programmes.

Three areas are in Education Action Zones, which are having a much more noticeable impact locally, through initiatives in schools, like provision of extra reading support or mentors. Eight areas, including two which are EAZ's, are included in the government's Excellence in Cities programme to improve educational attainment in urban areas. Plans of action were still being drawn up at the time of our fieldwork in 1999.

Five areas have Surestart funding to develop and integrate early years education, family support and health care. All of the initiatives are in the early stages of development, but have a relatively high profile locally, mainly because of the requirement to involve parents in the planning process and because of the multi-agency and community-based approach.

Table 18: Regeneration Initiatives and Special Funding Programmes

Area	Major Area Based Govt- funded regeneration scheme	Other Regeneration	Health Action Zone	Education Action Zone	Excellence in Cities	Surestart	TOTAL
West-City (Hackney)	✓ (NDC)		\		✓		3
East-Docks (Newham)	✓ (SRB)		✓	✓		✓	4
Overtown (Knowsley)	✓✓ (NDC and SRB)		✓		✓	✓	5
Riverlands (Nottingham)		✓	✓		✓		3
Shipview (Newcastle)	✓ (SRB)		✓		✓		3
The Valley (Sheffield)	✓ (SRB and NDC)	✓	✓	✓	✓	✓	6
High Moor (Blackburn)		✓		✓			2
Middle Row (B'ham)	✓ (SRB)		✓		✓		3
Fairfields (Caerphilly)		✓					1
Southside (Redcar/C)	✓ (SRB)		✓		✓		3
Kirkside East (Leeds)		✓	✓		✓	✓	4
Beachville (Thanet)		✓				✓	2
TOTAL	7	6	9	3	8	5	

Table 18 shows the coverage of these initiatives in the twelve areas. The overwhelming impression, confirmed on the ground, is of significant new investment and a plethora of initiatives in these areas. No area is without additional programmes of this kind. The areas that appear most deprived on deprivation indices all have major government-funded programmes. However, the levels of activity and investment vary considerably. The Valley (Sheffield) for example, has all of the major programmes except a major SRB programme (it does have a smaller SRB which has been used to build community infrastructure and capacity prior to New Deal for Communities funding). Overtown has every initiative except an Education Action Zone, but is included in Excellence in Cities, which has a 'mini Education Action Zone' within it. By contrast, Fairfields, in Wales, only has its People in Communities programme; the Thanet area a small SRB and Surestart, and Riverlands (Nottingham) just a Health Action Zone (and an estate-based regeneration scheme), although this area was the subject of a major area-based programme in the early 1990s. Interviewees whom we asked about the distribution of regeneration funds generally suggested that in the competitive bidding process, expertise in bidding, political and historical factors can all be influential in determining funding, as well as the needs of the areas.

Chapter 4: Is Anything Changing?

All of the twelve study areas have experienced a long period of economic decline. Social problems are deeply entrenched. Most have lived through various attempts to regenerate them, through slum clearance, Urban Programme, City Challenge, or Estate Action. As we have seen, numerous areabased interventions are also being targeted towards them. Many of their residents are also affected by wider government initiatives such as Welfare-to-Work policies, school improvement programmes and the Working Families Tax Credit. So are the areas recovering? This chapter presents some early evidence. Further collection and analysis of this type of data will be the major purpose of our continuing research.

It was striking that, when we conducted our first round of fieldwork in 1999, there was no area in which the residents we spoke to identified major improvements overall, although they did identify specific aspects that were improving. Table 19 shows that the most common improvements that residents observed were aspects of the neighbourhood environment or community life: physical estate improvements, more responsive local services, or more chance for community involvement.¹¹

In four areas, there had been a reduction in the social problems affecting the area. In all these, acute problems with crime, drugs and anti-social behaviour had been overcome, but other social problems, such as early childhood disadvantage and poor health, were not seen to be improving. In many cases, there was still a strong perception that people with multiple problems were being 'dumped' in the area, compounding its difficulties. This was not identified as a problem in Broadways (Birmingham) and there were two other cases where an improvement in the social mix of the area was noted – Bridgefields (Blackburn), where lettings had been suspended prior to redevelopment, and Saints Walk (Knowsley), where estate improvements had led to a slight increase in the popularity of the area.

As Table 19 shows, there was no area where the residents we spoke to highlighted a significant recent increase in job opportunities for local people as a noticeable change in the area, despite the fact that there have been significant falls in registered unemployment in every case (Table 20). We spoke largely to resident activists, who are engaged with tackling area problems and are perhaps more likely than other residents to draw attention to these, rather than to broader economic trends. However, it is

¹¹ Table 17 lists neighbourhoods not areas. This is because it includes observations on neighbourhood conditions. Table 18 refers to areas, because economic issues are rarely specific to one estate or neighbourhood, and because unemployment data is collected at ward level, which corresponds more closely to areas than neighbourhoods.

noticeable that, in this period of sustained economic recovery, the economic recovery of these neighbourhoods was rarely mentioned by our interviewees as a significant element of change.

In six areas, residents were certainly aware of new job opportunities close by, but doubted that local residents would benefit from these. These were Southmead (Leeds) where a new supermarket and shopping centre was opening, Rosehill (Nottingham) the Grove (Hackney), East-Docks (Newham), Bridgefields (Blackburn) and Sunnybank (Newcastle). In three of these areas, we have also interviewed families, who felt optimistic about the general direction of economic change, but remained to be convinced about the tangible benefits that would result, and whether these could be sustained over time. In the other areas, residents were sceptical about whether there had been much job growth, or felt that gains in the service sector were being offset by continuing losses in manufacturing industry, or that new jobs were part time, poorly paid or insecure.

Table 19: Residents' Views of Area Improvement (1999)

	Economic Opportuni ties for Residents Improving	Social Mix of Community Improving	Improvement in level of social problems eg crime, drugs, health, family problems	Improvements in Neighbourhood Conditions and Social/Community Life	
The Grove (Hackney)				✓ new housing management contractor	
Phoenix Rise (Newham)					
Rosehill (Nottingham)			✓ fewer crime problems	✓ community resource centre and revival of residents group	
East Rise (Sheffield)				✓ greater community cohesion through residents Forum	
Broadways (Birmingham)					
Saints Walk (Knowsley)		✓ people causing severe problems gone	✓ fewer drug, crime and anti- social problems	✓ estate improvements and more community activities	
Sunnybank (Newcastle)				✓ some estate improvements and better response from agencies to residents concerns	
Southmead (Leeds)			✓ fewer drug, crime and anti- social problems		
Borough View (Redcar and Cleveland)				✓ estate improvements in one part	
Bridgefields (Blackburn)		✓ people causing severe problems gone. Stable core left	✓ fewer drug, crime and anti- social problems		
Valley Top (Caerphilly)					
Sandyton (Thanet)	Not able to interview any residents in this area.				
TOTAL	0	2	4	6	

Statistical Evidence of Economic Change

Trends in unemployment certainly show evidence of a strong economic recovery in all the areas. As Table 20 shows, in April 2000 they had between 53% and 72% of the claimant unemployed in April 1996. The areas with the biggest falls (West-City, East-Docks, High Moor, Riverlands, Shipview and Beachville) were also the areas where residents had been most aware of increasing opportunities.

Table 20: Wholly Unemployed Claimants 1996 - 2000

Area	April 1996	April 1997	April 1998	April 1999	April 2000	April 2000 as % of April 1996
West-City (Hackney)	2661	2264	1833	1752	1420	53
East-Docks (Newham)	1915	1425	1270	1240	1056	55
Overtown (Knowsley)	2598	2169	2070	1802	1676	65
Riverlands (Nott'ham)	2763	2184	1712	1674	1488	54
Shipview (Newcastle)	2295	1764	1696	1518	1327	58
The Valley (Sheffield)	1400	1192	1086	654	877	63
High Moor (Blackburn)	931	629	590	602	527	57
Middle Row (B'ham)	2796	2311	2125	2195	2013	72
Fairfields (Caerphilly)	843	651	574	527	534	63
Southside (Redcar/C)	2088	1652	1567	1453	1323	63
Kirkside East (Leeds)	1219	1018	830	766	748	61
Beachville (Thanet)	2218	1743	1490	1343	1190	54
England and Wales	1937102	1457903	1189432	1126700	976605	50

Source: Nomis

Claimant count rates are not available at ward level, so it is not possible to compare the percentage point reduction with the national figure. However, as a proportion of their level in 1996, the numbers of unemployed have fallen less in all of the twelve areas than the national average. Data for wards containing two of the smaller neighbourhoods do show a more rapid fall, but both of these have peculiar circumstances. In Bridgefields, there have been no lettings for over eighteen months, and interviewees reported that the remaining households tended to be the more stable, working families. In Sandyton, the hotel accommodation which used to house a lot of unemployed people now has high concentrations of asylum seekers, who cannot claim Jobseekers' Allowance.

Moreover, three other factors must make one cautious about economic recovery in the twelve areas. All of these are explanations which were put forward by interviewees and which we will be investigating further through analysis of employment and benefit data. First, some of the fall in unemployment will reflect movements off the unemployment register, but not into sustained employment, since the introduction of the New Deal and more stringent requirements for Job Seekers.

Some people who were unemployed may have moved onto a more appropriate benefit (such as Incapacity Benefit). Others may have disappeared from the benefit count altogether, and be living on undeclared or illegal earnings. And some former claimants will be in subsidised employment that will not necessarily lead to permanent non-subsidised jobs.

Secondly, national evidence suggests that the changing structure of the economy is providing less secure employment, albeit more of it. Even in areas of net job gain, there has been a decline in full-time manual jobs held by men, to part-time service sector jobs held by women. Men who were formerly employed in skilled manual work are more likely to have been downgraded into less skilled work or unemployment or casual work. (Turok and Edge 1999, Green and Owen 1998). The use of flexible employment practices is growing (Green 1996) as is the number of people in temporary work (Howarth et al 1998). This was certainly borne out by our interviews in areas such as Fairfields (Caerphilly), where the main local employer is now a packing factory offering little more than the minimum wage and in Southside (Redcar and Cleveland), where the only significant new local jobs are in a food processing plant offering low wages. Many households do not see these as 'first jobs', bringing in enough income to support a family. Often they are taken by women. In Shipview (Newcastle), residents also talked about the increase in short-term contract work. Poor quality or insecure jobs are a disincentive to come off benefit into work, and they also make the area vulnerable to future recession.

Thirdly, there are concerns about how long the recovery of the areas can keep pace with the national trends. As we have discussed earlier, some of those who are out of work have severe barriers to employment. The view was expressed in some areas that most of those who wanted work and simply needed some help or re-training are now working, and that the problems of those who remain unemployed are more complex. These problems need to be tackled if economic recovery can be sustained. On the other hand, if they can be tackled successfully, there is still room in these labour markets for further economic growth, perhaps even faster than in areas where labour market slack has already been exhausted.

Population Change

The Office for National Statistics has very recently released ward level population estimates that will enable us to assess population change in our areas since 1991. Meanwhile, interview data, supported by local authority population estimates, suggests that there are areas of population growth, slow or no growth, and areas of population loss.

The four growth areas are those where there is high demand for housing: West-City and East-Docks in London, Middle Row in Birmingham with its growing Asian population, and Beachville in Thanet, where there has been an influx of asylum seekers. In three areas, it was suggested that population was actually falling, with a drain of people to other areas in the Borough or outside, mainly because of the poor economic and housing situation and sometimes because of problems of crime and anti-social behaviour. The supply of new housing in and around these areas is enabling people to leave. These were Southside (Redcar and Cleveland), Shipview in Newcastle and Fairfields in Caerphilly. These are the ex-industrial areas, where the population was closely linked to the major employers which have now gone. In the remaining areas, the initial evidence suggests that population was probably static.

At this stage, it is only possible to tell from anecdotal evidence whether the character of the areas is changing as the population changes. Other studies (Power 1996,1997) have shown that both high population pressure and overall population loss can increase the concentration of disadvantaged people over time. In areas of high population pressure, the least advantaged residents have no choice about where they live, and are pushed initially into the least desirable areas, leaving when they become better off. This process appears to be happening in our study areas. The inner city areas are apparently seeing significant changes in the overall composition of their populations, with increasing ethnic mix and consequent changes in age structure. Beachville and High Moor (Blackburn) also show evidence of these changes, to a lesser extent. A good indicator of these kinds of changes is the school population, which has a higher proportion of people from ethnic minorities than the population overall in 1991. In West-City (Hackney), the primary schools were 68% 'non-white' in 1999, while the 1991 population (0-17) was 44% non-white, and in East Docks the school population (primary and secondary) is 39% non-white, compared with 24% non-white (area population 0-17) in 1991 (Mumford 1999). The greater ethnic mix in the school population may reflect the younger age profile of ethnic minority groups, but it also appears to reflect change in the population composition of the area. In Middle Row in Birmingham, the local secondary school has over 98% of its pupils from ethnic minorities, predominantly from the least advantaged ethnic groups in British society, Bangladeshis and Pakistanis. In 1991, the child population (aged 0-15) of the enumeration districts closest to this school comprised 75% Pakistani and Bangladeshi people. This suggests an increasing Pakistani/Bangladeshi population.¹³ Interviewees in these areas, and in the Valley (Sheffield) and Beachville (Thanet), commented on the changing ethnic mix. Headteachers particularly noted the small but growing numbers of children from war-torn countries such as Angola, Somalia, Bosnia and

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^{12 &#}x27;non-white' does not include the Turkish/Kurdish population, which is significant in number

¹³ Clearly the comparison is not an exact one. According to the headteacher, the school draws almost entirely from the local area, but there is not a 'catchment area' as such that we can replicate with Census data. Some children come from outside the area. The Census only enables use look at ethnicity for the age groups 0-4 and 5-15, not for the exact age group of the children in secondary school now.

Albania. A religious leader in West-City said that they had become accustomed locally to seeing international conflict on the news and expecting a trickle of new residents to start appearing from these countries. The continued in-migration to such areas of disadvantaged minorities creates extra demands for services and ensures a continued concentration of social exclusion, regardless of other changes. In only one area, West-City, was there evidence of a counter-trend, with an influx of professional people to new warehouse conversions and loft apartments.

By contrast, in low demand areas, the balance of population changes over time as people leave and are either not replaced or replaced by people who are not able to choose a more popular area. The changes tend to be seen most in the least popular neighbourhoods. The changing population mix contributes to the low status of the neighbourhood, and its ability to attract residents with more resources, thus a cycle of decline sets in. Our study suggests that this process is not causing the same degree of population change as seen in the high pressure areas. The ethnic mix and age structure of the population is remaining the same. However, in the low growth or no growth areas, residents observe that there has been an increase, over time, in the number of very disadvantaged people moving into the area. These include both households with social problems, and those which are anti-social or criminal. The gradual drawing of the least advantaged people to the least popular neighbourhoods is also recognised by professionals. One social worker we interviewed was new to the area and not familiar with our study neighbourhood but immediately recognised it as an unpopular one. "it must be" she said "otherwise our clients wouldn't get put there".

In most of the areas, it appears that this shift in population has been a gradual process, and is still ongoing. However, in some of the neighbourhoods, specific local factors had accelerated the process. For example, in Shipview (Newcastle), the simultaneous movement of a number of elderly residents into new sheltered accommodation created pockets of empty properties which were filled with new and more disadvantaged residents. In Southside (Redcar and Cleveland), the regeneration of a neighbouring area resulted in temporary displacement of problem households. Pockets of hard-to-let or empty homes were a contributory factor in both of these areas. There were only two neighbourhoods where the current trend appeared to be going in the other direction. In Bridgefields (Blackburn), residents reported that the social mix had recently improved precisely because there had been no new lettings, and in Saints Walk (Knowsley) the improvements to the estate have improved its popularity.

Thus our initial evidence points to both large area-level changes in population, bringing in more disadvantaged population groups (particularly ethnic minorities) over a period of time, and smaller neighbourhood level changes, bringing in more disadvantaged <u>individuals</u>. Both tend towards a high concentration of disadvantage in the area over time.

Social Inclusion and Area Change

As indicated earlier in the report, there are certainly concerns that some of the problems of social exclusion are not yet starting to show an improvement. There were deep worries among our interviewees about a disaffected minority with very poor basic skills and qualifications, about growing drug problems, deepening health problems, and increasing family conflict and childhood disadvantage. We do not yet have local time series data to test these observations, but national data gives some indications of the general trends.

Basic skills data from our areas shows that lack of skills and qualifications are certainly a major problem. Nationally, there has been little improvement in recent years, and Britain has some of the worst levels of literacy among developed countries (Moser,1999). It is not surprising that this problem is so prominent in our study areas. But is it getting any better? The New Labour government has placed a strong emphasis on improving literacy and numeracy and on eliminating the long tail of underachievement in schools. Our evidence suggests that the skills gap is starting to close. School improvement is making a difference. There are 21 secondary schools in the twelve areas, for which attainment data is available from 1994 through to 1999. Twenty of these had improved on one or more measures of attainment in this period. The greatest improvements have been in the lower and middle range of the attainment scale. On average, schools in the study areas reduced by 6% the proportion of pupils leaving with no GCSEs in 1999 compared with 1994 (against a national reduction of 2%), and improved by 10% on the proportion of pupils passing 5 A-G GCSEs (against a national improvement of 3%). There is a long way to go but progress is faster than average. Families in our study areas in London cited school improvement as one of the major changes in the area in recent years (Mumford, forthcoming).

Table 21: Improvements in GCSE Performance 1994-1999

	National Average	Average for Study Area Schools
Any passes 1994 1999	92 94	83 89
% 5 A-G 1994	86	67
1999	89	77
% 5 A-C 1994 1999	43 48	16 21

Source: DfEE School Performance Tables

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¹⁴ Three measures were used: the number of pupils passing any GCSEs, the number passing 5 GCSEs at grades A-G, and the number passing 5 GCSE's at grades A*-C

The same progress is not evident in relation to the other problems identified through our interviews. Disadvantaged areas are certainly experiencing the 'sharp end' of these societal problems, some of which are worsening.

Drug use is not a problem confined to deprived areas. In fact, overall, occasional drug use is higher in 'thriving' and 'rising' areas than deprived areas. However, there is some evidence that in the most troubled areas, the nature of the problem is different, with more problematic drug use. The British Crime Survey shows that drug use is higher in 'high disorder' than 'low disorder' neighbourhoods. Drug use among young adults (16-29) is most common among the unemployed, and in households with incomes less than £5,000 per year. Use of heroin and cocaine is twice as common among the lowest income households as those with the highest incomes, and unemployed residents are more than seven times more likely to have taken opiates than employed residents (Ramsay and Partridge, 1998). There is certainly a strong relationship between problematic drug use and offending. A recent survey of arrestees showed that 61% had taken at least one illegal drug. 18% tested positive for opiates and 10% for cocaine/crack (compared with less than 1% of the general population who said they had used these drugs in the last month). Half of these arrestees said their drug use was connected with their offending (Bennett, 1998). Areas where offenders live are, by implication, likely to see a greater prevalence of drug use. And while there is no strong evidence that use of drugs, overall, is rising, there are indications that some specific problems are increasing: an increase in cocaine use, a fall in the age of first drug use, and an increase in poly drug use. Heroin, which appeared to be causing most of the problems in our study areas, is still very much a minority drug but its use is increasing. Research for the Home Office in 1998 (Parker et al, 1998) reported on new outbreaks of heroin use (the first major wave since the mid 1980s) in over 80% of police force areas, beginning in about 1996, and led by a major new illegal importation. This study notes falling prices and active marketing of heroin for smoking rather than injecting, and suggests that most of the new users can be described as 'socially excluded'. A study earlier this year suggests that heroin use among UK schoolchildren has doubled since 1996 (Plant and Miller, 2000). This picture of burgeoning heroin markets on top of already existing markets in softer drugs is very much consistent with what was described by respondents in some of the study areas.

Likewise, concerns about a cycle of poor health perpetuated by poverty and unhealthy lifestyles are borne out by national data. Since 1980, health inequalities between the poorest areas and the rest have grown. The proportion of premature deaths has increased in the poorest areas, especially for men, and decreased in the richest (Shaw et al, 1999). And the Department of Health's survey of the health of young people illustrates how health inequalities are being perpetuated. Children in lower social classes are more likely than others to consume sweets, soft drinks and crisps and less likely to eat fresh fruit and vegetables. Smoking is highest among young people from lower social classes and

those in social housing. Ill health and smoking in children are associated with ill health and smoking among parents.

There were concerns in all our areas about family fragmentation and about poor parenting leading to early childhood disadvantage. At the extreme, poor parenting does seem to be on the increase. The number of Child Protection Registrations nationally has increased by 9% in the last decade, and the proportion of those registered for neglect has risen from 35% to 46% since 1996. In general, rates of Child Protection Registration are much higher in disadvantaged local authorities than in others. For example Newcastle has 65 children per 10,000 population on the register, Birmingham 47, and Hackney 51, compared with a national average of 27 per 10,000. It is difficult to tell whether parenting skills have been lost among the general population. However, rates of conception among teenagers, who might be assumed to have the least parenting knowledge, are increasing. In England and Wales, conception rates among under 20s fell between 1990 and 1995, but rose in 1996 (from 58.6 per thousand in 1994 to 63 per thousand). The under 16 conception rate rose from 8.1 per thousand in 1993 to 9.4 per thousand in 1996. Daughters of teenage mothers are more likely to become teenage mothers than daughters of older women, so some families are seeing the generations become increasingly compressed. And teenage pregnancy is certainly something experienced much more frequently in deprived areas. Girls from the lowest social class are ten times as likely as those from the highest to become teenage mothers, and others who are at greater risk are homeless young people, young offenders, those who have grown up in poverty or not attended school, and those who have experienced family breakdown (SEU 2000, Hobcraft and Kiernan 1999).

It appears then, that the qualitative evidence from our interviews does reflect real change, not just growing concern or a tendency to look back on a golden age when everything was better. The problems that people most commonly report as getting worse generally are getting worse in society as a whole. Because deprived areas have a concentration of these problems, they witness the 'sharp end' of broader changes. They are, in a sense, the barometer of society's problems. It may be many years before the barometer starts to indicate the impact of measures to counter these problems, although some early indications of the direction of change, such as school attainment data, are promising. The key questions for our study are whether, in the face of these broader changes, local interventions can have any effect, and whether, if they do, that effect is offset by other changes (such as population or housing change) which increase the concentration of the most vulnerable people in certain places, even when their numbers overall are declining.

Neighbourhood Change

While residents did not observe major improvements in economic opportunity, social mix or social inclusion, they did observe, in seven cases, significant improvements in neighbourhood conditions or quality of life, including the extent of community interaction. (see Table 19). For example, in Saints Walk (Knowsley), a combination of estate improvements, policing, housing enforcement and community development had turned the estate around following a rapid decline. In the Grove (Hackney), major improvements in the condition of the area were noted after a new housing management company was brought in. Caretakers were reintroduced and a small amount of money was made available for minor estate works to be decided by the residents. Such measures improved residents confidence in the neighbourhood.

By the same token, decline in other aspects was also noted. For example, while major estate improvements in one part of Borough View (Redcar and Cleveland) had improved the quality of life and social mix, another part has experienced a rapid decline, with increasing numbers of empty properties, crime, drugs, arson, vandalism and litter. Residents of the first estate felt positive about the improvements and their role in shaping them, while residents of the second felt powerless to stop the decline. In Sunnybank (Newcastle), there had been improvements in the responses of police, housing and environmental services to the growing problems, resulting in an improved estate environment, but the number of empty homes and the drug problem continued to increase.

Because of their size, neighbourhoods are finely balanced. Relatively small changes in population composition have significant effects, triggering a cycle of decline or recovery. Similarly policy interventions can be closely targeted and visible. This suggests that neighbourhood problems even within very deprived areas are neither inevitable nor irreversible. Those issues that have a common impact - physical appearance, crime, anti-social behaviour, community activity, services and facilities - can change even in the absence of any change in underlying issues that affect individuals such as employment, health or family composition. Empty houses can be knocked down or improved and relet, drug dealers can be arrested, youth facilities can be provided, litter can be cleaned up. Neighbourhood problems can be addressed by local organisations and residents, and tackling them does make a difference to the hierarchy of neighbourhoods, within relatively short periods. Saints Walk, for example, is now relatively popular within Overtown, having been extremely unpopular in the early 1990s. The reverse process has happened in Sunnybank and in Borough View. Even within areas with very deep social and economic problems, neighbourhood quality of life and popularity can be affected relatively quickly.

However, the evidence also suggests that wider issues need also to be tackled if recurrence or displacement are to be avoided. Saints Walk is a success story, but several years since the major improvements there, problems are beginning to recur, and the residents' association needs ongoing support to maintain its resolve. Meanwhile, other nearby estates have suffered the same kind of decline that Saints Walk suffered in the early 1990s. While Bridgefields has 'quietened down', other areas of Blackburn report pockets of similar problems, some caused by former Bridgefields residents. Making a lasting difference, and a widespread one, requires sustained investment, a willingness to bolster the factors that protect neighbourhoods from decline (such as community action and neighbourhood management) and broader action to tackle the underlying problems.

Summary

Initial evidence of change thus suggests that:

- The areas are certainly making a significant economic recovery. However, the fall in unemployment is lower (as a proportion of its 1996 level) than the national average. There remain concerns about a minority of people for whom there are still major barriers to work, and about the types of jobs becoming available as the economy changes.
- The impact of economic opportunity on aggregate area employment is being offset to a certain extent by continuing downward pressure on population mix. Although opportunities may be increasing for residents, new residents tend to be disadvantaged individuals and groups, who may find it most difficult to take advantage of these opportunities. Whether the poorest areas will become significantly less poor unless this trend is reversed is debatable.
- At the same time, some of the social problems that affect these individuals, and the areas, appear
 to be deepening. Educational attainment, however, is improving more quickly than the national
 average.
- Neighbourhood conditions and some aspects of the quality of life are changing more quickly than area economic fortunes, population mix or trends in social problems. Even in neighbourhoods with deep social and economic problems, positive change in these aspects is observed, suggesting that neighbourhood problems are susceptible to intervention even in the face of more intractable social and economic difficulties, although not necessarily sustained, and possibly displaced, unless these other issues are tackled.

Chapter 5: Discussion and Conclusions

This report has summarised the key features of the areas at the start of our study. Its main purpose is to provide the baseline for our analysis of change. From it we can also start to draw conclusions about the state of the most disadvantaged areas in England and Wales as we enter the 21st century, the factors influencing their position, and the way in which we think about their regeneration.

Commonly Experienced and Deeply Embedded Problems

The recent policy focus on deprived areas, and the targeting of funds towards them rather than other areas, naturally encourages us to think of such areas not only as places apart (ie different from the rest) but as places that are similar to each other. We talk of 'worst estates' and 'deprived neighbourhoods' and use average statistics about their demographic characteristics and social problems. Sometimes, the problems of 'worst neighbourhoods' are referred to synonymously with the problems of 'inner cities'. We assume a common set of problems. Indeed, in his foreword to the Social Exclusion Unit's report on deprived neighbourhoods, the Prime Minister suggested that:

"We all know the problems of our poorest neighbourhoods - decaying housing, unemployment, street crime and drugs. People who can, move out. Nightmare neighbours move in. Shops, banks and other vital services close" (SEU 1998)

This report has looked more closely at these problems. In many ways, it confirms this picture, showing that deprived areas do have much more severe problems than are experienced elsewhere, and that they have certain problems in common. All of the twelve areas in this study, selected to be representative of poor areas in general, have suffered severe economic decline. De-industrialisation has had a profound effect on household income, social inclusion and social organisation.

- Unemployment is higher than average, and in every case, levels of literacy and educational attainment are lower than average.
- Educational participation, both at school and among adults, is low and there is a thriving informal and illegal economy.
- There are problems with the quality and maintenance of the housing stock.
- Crime is above average and there are concerns among residents in all areas about drug use and dealing.

- Shops, banks and other vital services are struggling, although a reasonable level of provision remains in most areas.
- The areas are all regarded as undesirable relative to other areas around them, and the stigma that is attached to them is difficult to shift.
- Levels of physical and mental ill health are low.
- Early childhood disadvantage associated with poverty and with parenting problems and family fragmentation is a common problem across the areas, starting a cycle of disadvantage that is difficult to break.
- Many people lack confidence in their own abilities and prospects, and in their ability to effect
 change in the neighbourhood and influence decision-making by local agencies. In many areas
 there is a mistrust of authority and, under pressure, social networks in some communities
 have become narrower and less inclusive.

Many of these problems are deeply embedded. They have grown up over a long period, and have affected people's sense of identity and confidence, and their attitudes and interactions with others, as well as more tangible outcomes. They are not going to be resolved in a few years by general economic recovery or area-based interventions. Sustained investment will be needed to effect change.

Community Potential, Services and Investment

Yet while there are severe problems, disadvantaged areas also have much to build on. Some of the very negative media coverage of these areas is resented by their residents and felt to be inaccurate. Although there was certainly a sense that it had changed, we did not find that 'community' had collapsed. In over half of the areas, the strength of the community and the people in it came through as one of its major assets. Even in areas where there had been a breakdown of social order precipitated by the behaviour of some residents, residents did not describe a loss of community, but rather a tightening of existing, trusted, social networks, albeit less trust and inclusion of newcomers. Most areas have strong formal social organisation as well as informal links. In some, residents are taking a lead in regeneration programmes. Existing community networks, self-help and mutual aid activities are a major strength of these areas and it is essential that they are encouraged and supported. Genuine resident involvement by local authorities and other organisations has not always been welcomed or encouraged in the past, and in many areas residents sense that their contributions have been sought only as a token, that their efforts are undervalued and that things have been given to them, rather than owned by them. This in itself is disempowering and contributes to social exclusion

as well as to area problems. Changes in structures for area management and governance and for community involvement are beginning to emerge, but are in their early stages.

Just as community has not collapsed, nor have public services. Services in these areas are under extreme pressure because of the high demands placed upon them. Some services, in some areas, are inadequate. For example, we found areas with insufficient GP provision, social services departments with excessive workloads, schools that could not recruit teachers, and so on. There is certainly more that could be done to bolster mainstream services and resource them better to deal with the extra pressures that they face. Many people regard additional investment in mainstream services as critical. However, in most areas, the level of service provision is at least as good as in other areas in the city or Borough, and in some, it is better. For example, one area has extra refuse collection, and one has a very high level of youth and community services relative to other parts of the city. The areas have certainly not been abandoned by public services. The provision of these services is seen as essential in limiting their problems. Two thirds of them currently have a major area-based programme funded by central government, or have recently had one. All are benefiting from at least one area-based programme or zone, most of which have only started recently. Thus central government funds are getting to the most deprived areas, although there is still a sense that the allocation of additional resources owes as much to effective bidding and political influence as to area need.

Despite the problems, the areas have potential for improvement, and we should expect to see change for the better during the period in which we are following them.

The Diversity of Disadvantaged Areas

While this study illuminates the common problems of deprived areas, it also illustrates the great diversity of their physical characteristics, population composition, and problems. It is a mistake to think of deprived areas as though they fit a particular blueprint. The areas in this study (which represent the national distribution) include inner city areas, outer estates, a seaside town and mining villages. There are areas of mixed tenure as well as Council estates, white working class areas as well as those with a dominant ethnic minority group and those with diverse ethnicity. Some of the areas are relatively attractive and in good physical condition. Others are extremely run down. Some have few empty properties while others are between a fifth and a half empty. Some are renowned for crime and drug problems, while others are not. Some have excellent facilities and services, while residents of others complain that they have been neglected over the years. In some, there is a myriad of community groups and voluntary organisations; in others relatively few. Residents of some talk about the strength, homogeneity and stability of the community, whilst others note rapid population change

and a diversity of different people and interests. In some areas, our 'baseline position' comes at a time of very rapid change, whereas other areas are currently more stable. Some areas are experiencing economic recovery close to the national rate. Others are lagging well behind, even relative to other areas in the same cities.

Disadvantaged areas may share some common problems, but they are vastly different in their history, character and infrastructure. What will be appropriate for one area will not be right for another. The study illustrates the need for locally tailored strategies, building on local knowledge and experience, as well as the need for national strategies to address common difficulties.

Understanding Area Change: Elements of 'Regeneration' and Influences on It

Our study aims to measure how the areas are changing, relative to others, and the reasons for those changes. The baseline work sheds further light on how change can be assessed, on what would change if an area was 'regenerated', and on what we mean when we say an area is improving or declining.

Area and neighbourhood characteristics are of three kinds. First, there are intrinsic characteristics, well established and hard to change. These include their location, transport infrastructure, housing and economic base. Secondly, there are population characteristics. Intrinsic characteristics and population mix are interlinked in a number of ways. Location and housing tenure determine population to a large extent. For example, inner city areas with concentrations of social housing draw in immigrants and the homeless. And an area's intrinsic advantages or disadvantages determine its popularity among those who have a choice about where they live. Thus areas with poor economic opportunities have lost working age population, and within areas, neighbourhoods with new or improved housing are usually more popular than those with a poor housing stock. Thirdly, there are characteristics that are acquired over time as the least advantaged people become concentrated in the least advantaged neighbourhoods. These include reputation, environment, facilities and services, levels of crime and disorder, and aspects of social life such as the extent of social interaction and residents' levels of confidence in the neighbourhood.

Thus when we talk about an area improving or declining, we may be referring to a number of different features or characteristics of the area, driven by influences at different levels.

The intrinsic characteristics of areas are determined both by local factors and broader city or regional influences. Area economic structure often reflects the wider economic structure of the city or region but is exacerbated by local characteristics. For example, Valley Top, in Fairfields, Caerphilly is

inaccessible to new jobs in the area because it is at the far end of a valley. Poor transport and access means that people here are more dependent on employment in the neighbourhood than people in other better connected local towns. The effect of economic history, too, is mitigated by area-level factors; in areas of high population pressure and changing ethnic mix, economic decline is felt mainly through its continuing impact on job availability, whereas in areas of low population change within the same regions, it also has an impact on collective memory, identity and social organisation. Similarly, housing conditions and demand vary between neighbourhoods while being driven by wider changes. The Valley, in Sheffield, is affected by a national and city-wide decline in demand for Council housing. With more choice of housing available, flats and bedsits in the city have become hard to let. The Valley has a high proportion of such properties, and correspondingly a high proportion of hard-to-let and vacant homes. By contrast, the Saints Walk estate in Overtown, Knowsley has recently been modernised. Its housing stock is more attractive than other Overtown estates and demand is slightly higher, even within the context of low demand borough-wide.

Like intrinsic characteristics, population mix and population change are also driven by a combination of regional and local factors. For example, population loss in Shipview reflects the general depopulation of Newcastle's industrial areas as much as it does the particular characteristics of this area. Loss of population in Southside reflects a drift west from Redcar and Cleveland in general. But local factors, including location, determine the extent to which these wider trends have an impact. In this study, all except one of the areas of high population pressure, which are seeing continuing inmigration of people from ethnic minorities and refugees, are inner city areas. All of the outer core or city edge areas have static or declining populations. Other local factors are important too. For example, Middle Row in Birmingham is attracting new Pakistani and Bangladeshi immigrants because of its Asian shops, mosques, community organisations and family ties. Southmead in Leeds has a high child density because of its high proportion of large family homes. Sandyton in Thanet attracts refugees, the homeless and the unemployed because of its concentration of hostel and cheap rented accommodation. So while broader trends influence the general direction of change, local factors influence its extent and impact.

'Acquired characteristics', such as reputation, environment, facilities and services, levels of crime and disorder, and aspects of social and community life, are the most variable at area and neighbourhood level, and the most susceptible to intervention at this level. We found considerable variation between neighbourhoods on these characteristics, and many different influences on them, such as the role of the media, the responsiveness of local service providers, and the influence of key politicians and community leaders, or of prominent families in the area. For example, in Kirkside East, a damaging television programme had contributed to the poor reputation of the area, but the local involvement of an influential Councillor and MP had also brought excellent and innovative services. Examples such

as this are illustrated in the area case studies that accompany this report, and will be detailed further in later work. The key issue here is that acquired characteristics tend to be locally determined, whereas intrinsic characteristics and population mix arise through the interaction of influences at neighbourhood, area, city and regional levels. For this reason, neighbourhood characteristics are susceptible to local intervention. Dire neighbourhood conditions are not an inevitable consequence of concentrated deprivation. We found well-managed neighbourhoods with attractive environments in extremely deprived areas, and poorly managed neighbourhoods with poor living conditions in less deprived areas. Good management in these cases was achieved through mainstream services, not through additional regeneration programmes. Effective management can help stem a rapid decline, as in Sunnybank, where residents' confidence to remain in the neighbourhood was being bolstered by responsive housing management and environmental services, and can even reverse decline, as in Saints Walk, where intervention at the neighbourhood level by housing, police and residents had turned the area around and re-established its reputation.

Thinking about the different types of area characteristics and the levels at which they might be influenced is important for the design and evaluation of area-based regeneration programmes. In practice, these usually contain measures aimed at all three kinds of area characteristics. For example, some schemes such as housing improvement schemes or business development programmes aim to tackle intrinsic area characteristics; others, such as community lettings policies or mixed tenure developments, aim to change the population mix; and some aim at quality of life improvements, such as installing CCTV cameras or employing litter pickers. Some regeneration programmes simply contain a collection of good initiatives, but lack strategic direction and clarity over which aspects of the area need to change, and how much the regeneration programme can contribute to this. This is partly because priorities for regeneration programmes are often driven by shortfalls in local authority resources, or response to short-term needs, rather than by strategic thinking about what kind of 'regeneration' is needed. For example, the regeneration bid for West-City arose after a failed bid for estate renewal funds, and primarily as a means to renew the dilapidated housing stock. The bid for Southside arose because crime rates were soaring and urgent action was needed. Few initiatives define 'regeneration' or identify key aspects in achieving it. It is partly because of this that area-based regeneration initiatives are open to criticism. If they concentrate on quality of life issues, they are criticised for being 'cosmetic'. If they explicitly aim to change population balance, they can be criticised for displacing the problem, or for 'gentrifying' the area rather than benefiting those who live there, and if they concentrate on economic initiatives, they can be criticised for trying to tackle issues at neighbourhood level that are really determined far beyond the neighbourhood. A more strategic approach to regeneration, with area-based programmes clearly nested within broader strategies, is needed. Regeneration programmes will be the specific focus of our second round of interviewing, during 2001/02.

Cautious Optimism

The initial evidence is, in one sense, encouraging about area change. There is certainly more evidence of improvement than decline. But is not yet a picture of great advancement. There is a long way to go and some evidence that the areas are getting relatively worse.

The improvements most often noticed by residents are neighbourhood-level changes; estate improvements, better facilities or more involvement in decision-making. Only a handful of areas have yet experienced big improvements in underlying social problems or in the population balance and social mix. Social problems where there have been improvements in more than one area are crime and anti-social behaviour, as a direct effect of enforcement action against individuals, and low educational attainment, because of improvements in schools. Our informants (front-line staff as well as residents) thought that other social problems, such as the alienation of a minority from school and work, substance misuse, poor health and early childhood disadvantage, were probably getting worse. As we build up our time series data, we will be able to establish whether this is borne out by objective measures. Informants report that these continue to be areas in which people with problems are 'dumped' or end up because they have little other choice. In only one, West-City (Hackney), did we see evidence of gentrification. The dominance of social housing in many of the areas leaves them vulnerable to increasing unpopularity as that tenure becomes increasingly associated with poverty and lack of choice.

There has certainly been economic improvement in all areas, and substantial reductions in unemployment. But in every case, unemployment has fallen less, in relation to its 1996 level, than in the country as a whole, and in most cases, less than that of the borough or city in which the area is located. Many of our interviewees remained unconvinced of a major change in economic fortunes, suggesting that falls in unemployment mask the disengagement from the labour market of those with serious barriers to work and other sources of income.

Thus, optimism about area change must remain muted at this stage. Area-based interventions and economic recovery are having some positive impact, but possibly not enough to prevent further polarisation. At this stage, there are only two areas which appear to have the prospect of a real reversal of fortunes, changing their essential position in the residential hierarchy. In East Docks (Newham), there are new economic opportunities nearby and big improvements to transport infrastructure (East-Docks). In West-City, the property market is booming, to the extent that wealthier people will even consider ex-Council properties at inflated prices. These developments suggest that major improvements may come about, both for existing residents (especially in East Docks) and in the aggregate levels of deprivation in the area as a whole, as more affluent residents move in (especially

in West-City). An influx of more advantaged residents may have an impact on shops, services and the reputation of the areas. In both these cases, the new local opportunities are unusually great. Most areas are not yet seeing local change on anything like this scale. Intensive and continuing intervention is needed to promote their recovery.

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