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Conceptualising 'social capital' for health promotion in small local communities: a micro-qualitative study.

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Abstract

This paper reports on a micro-qualitative case study of peoples' experiences of local community life in a south east English town. This material is used as the basis for a critical discussion of the suitability of Putnam's notion of social capital as a conceptual tool for the design and evaluation of 'community strengthening' policies and interventions. The study was motivated by a concern that too much debate about social capital has been conducted by academics and policy-makers in a top-down manner, with inadequate attention to the realities of life in the local communities that they refer to. Three-hour semi-structured interviews were conducted with 37 residents in two less affluent wards in our town of interest. Informants - half men and half women, and spread across the 15-75 age group - were encouraged to talk about their personal experiences of local community life. Interview findings are presented within the 'norm' categories of trust, neighbourliness and reciprocal help and support, and the 'network' categories of participation in informal networks, voluntary groupings and community activist groupings. Our case study points to a number of ways in which Putnam's concept needs to be refined if it is to inform 'community strengthening' policies and interventions in England. Far more notice needs to be taken of the role played by informal networks of friends and neighbours in the construction of local community life. Attention also needs to be given to the complex and shifting geographical spread of peoples' significant social networks. Putnam's conceptualisation of cohesive local communities and his unitary notions of trust and local identity may also be unduly essentialist. In our particular communities of interest, they failed to capture the fluidity of local community norms and networks in a rapidly changing society. They also failed to do justice to the extent to which social distinctions – such as age, gender, ethnicity and housing tenure - shape and constrain the way in which people create, sustain and access social capital.

Introduction

This paper reports on a micro-qualitative study of peoples' subjective experiences of community life in two small geographically defined communities in south east England. The study has two aims, one substantive and one conceptual. From a substantive point of view we seek to provide an account of the networks and relationships that characterise local community life, in the context of the growing interest in 'local community strengthening' as a health promotional strategy. From a conceptual point of view we seek to critically examine the suitability of the concept of 'social capital' to serve as a conceptual tool for characterising local community life in England, in the context of our broader interest in health promotion. Recently, a number of researchers and professionals in the public health arena have turned their attention to the concept of social capital in the context of long-standing disillusionment with traditional health promotional approaches, particularly in the light of growing concern about health inequalities in Britain. Historically, information-based health education has been a popular method of health promotion. However Gillies (1998) suggests that information changes, at best, the behaviour of one in four people, and these generally the most highly educated and well-off members of society. This is because health related behaviours (e.g. smoking, condom use, exercise) are determined not only by conscious rational choice by individuals on the basis of good information -- but also by the extent to which the communities in which these individuals live are enabling and supportive of health-enhancing behaviours (Lomas, 1998). Within such a context it is argued that health promotion may actually increase health inequalities rather than reduce them (Acheson, 1998).

This situation presents health promoters with the challenge of developing policies and interventions that will create "health enabling communities", viz: social environments that enable and support the performance of health-enhancing behaviours (Tawil *et al.*, 1995). However our understandings of what constitutes a healthy community are still in their infancy (Campbell, 2000). A number of researchers have pointed to the possibility that the concept of social capital -- which has been associated with a range of positive economic and political outcomes -- might also be associated with positive

health outcomes (Baum 1999; Blaxter, 2000; Kawachi, Kennedy and Prothrow-Stith, 1997; Lomas, 1998; Wilkinson, 1996). They suggest that the concept might be imported into the area of health policy and intervention as a tool for conceptualising what constitutes a healthy community. This interest has been fuelled by a range of national government policy documents which have highlighted the importance of community strengthening as a strategy for reducing health inequalities, and for promoting health in the context of neighbourhood renewal in England (e.g. Saving Lives, 1999; Social Exclusion Unit, 2000).

While there are a number of conceptualisations of social capital, including those of Coleman (1990) and Bourdieu (1986), (see Schuller *et al.*, 2000, or Portes, 1998, for a discussion of these), it is Putnam's (1993, 1995) conceptualisation that has captured the most attention amongst health researchers. Using a place-based notion of community, Putnam suggests that a community that is high in social capital is characterised by:

- a dense array of community networks;
- high levels of civic engagement or participation in these networks; and
- generalised norms of trust and reciprocal help and support between community members, whether or not they are personally known to one another.

Proponents of social capital in the health field argue that if research could point to strong links between social capital and health, a key goal of health promotion would be to develop social capital in local communities as a way of enabling the performance of healthy behaviours. This would involve community strengthening initiatives geared towards promoting grassroots participation in local community networks as well as activities designed to promote a positive local identity and relationships of trust and reciprocity amongst local people (Baum, 1999; Lomas, 1998). As Labonte (2000) points out, this focus on social capital is consistent with a generation of community development research that has pointed to links between participation, 'empowerment' and health. However, to date such research has tended not to focus on the *types* of community networks and relationships that might provide a basis for health-enhancing participation and empowerment. It is in this regard that

we believe that the concept of social capital has the potential to contribute to this area of investigation.

While the concept of social capital forms an important and useful heuristic tool in the task of conceptualising local community networks and relationships, much work remains to be done in developing the concept (Morrow, 1999). It cannot be assumed that Putnam's conceptualisation of social capital – developed in the context of research into regional government in Italy and America – will automatically be an appropriate conceptual tool for the design and evaluation of local community strengthening health promotional initiatives in England. On the basis of a microqualitative study of social capital in a south east English town, this paper seeks to highlight ways in which the concept would need to be refined to apply to local conditions in England.

A micro-qualitative approach was considered appropriate in our investigation of local community life in line with our view that much thinking and writing about social capital and its potential as a community strengthening resource has been done in a top-down way by researchers and politicians. This work (e.g. Kawachi *et al.*, 1997) has often rested on large-scale statistical survey research, with little reference to the daily realities of life in the local communities and neighbourhoods that researchers and politicians speak of (Forbes and Wainwright, 2001). The findings presented below caution against making hasty assumptions about the existence of local community networks and relationships of the kind that Putnam describes. We highlight the need for careful investigation of the extent to which such community resources do indeed exist in small local communities beyond the Italian and American contexts that form the setting of his research.

The role played by the concept of community in the history of health and social services in England is a controversial one. Much has been written about the shortcomings of policies relating to 'community care' for example. Many authors have commented that while these policies might have made intellectual and political sense, they were based on unrealistically optimistic assumptions about the extent to which existing community networks and resources were adequate to the task of

providing adequate care and support for previously institutionalised people (e.g. Barnes, 1997). By the same token we argue that public health policies that seek to promote health-enabling communities need to approach this task with a realistic understanding of the types of community networks, resources and relationships that exist in their local communities of interest. Their conceptualisations of community need to resonate with the experiences and perceptions of ordinary people at the local community level. It is in the interests of enhancing such understandings that our study aimed to elicit peoples' accounts of such experiences and perceptions.

Method

Our research took the form of detailed open-ended interviews with 37 residents of two less affluent wards in a town in south east England, which shall be referred to as Ward 1 and Ward 2. According to the Townsend Deprivation Index, Ward 1 is ranked third out of the total of 16 wards in the town (with 1 being the most deprived and 16 being the least deprived), and Ward 2 is ranked seventh out of 16. Thus while both wards were in the lower half of the town's deprivation rankings, one was relatively more affluent than the other. Apart from one striking difference, which will be discussed below, informants' accounts of local community life were similar across the two wards.

In the light of controversies about the definition of the term 'community', we emphasise that in our study we used a place-based notion of community, defining it in terms of geographical ward. We did so in line with Putnam's conceptualisation of community as a geographically defined space - given that a key aim of the study was to examine the suitability of Putnam's notion of social capital for health promotional policy and intervention in England. However, as we will discuss below, our findings suggest that our informants' subjective locations of 'community' were at once narrower and broader than geographical ward boundaries. This finding echoes a range of community sociologists who warn of the limitation of assuming that 'communities' are located in bounded geographical spaces (Crow and Allen, 1994, Demaine and Entwhistle, 1996).

Our sampling strategy was that of a stratified convenience sample. Potential informants were identified through a separate pilot survey of community relations in our two wards of interest (Leonardi *et al.*, 1999). At the end of the survey questionnaire, people were asked whether they were willing to take part in a long qualitative interview focusing on local community life. Out of those who agreed to participate, we selected equal numbers of men and women from each ward, with both men and women spread equally across the 16-34, 35-55 and 55+ age groups. Of the 19 men interviewed, 3 were students, 7 in formal employment, 4 unemployed and 5 were retired. Of the 18 women interviewed, one was a student, 6 in formal employment, 6 were housewives, and 5 were retired. As discussed below, the extent to which our findings would generalise to other communities is a matter of empirical investigation. However, we believe that the richness and depth of our qualitative interviews provide a robust starting point for pointing to areas in which the concept of social capital might need refinement for health promotional work in England.

The interview topic guide covered each informant's personal life history, their experiences of community life, and their most significant formal and informal networks. Interview participants were encouraged to speak freely on whatever associations the questions elicited, and the interviewers placed as few constraints on people as possible. Interviews, which were three hours long, were conducted in informants' living rooms by an experienced interviewer, with no one else present. They were tape recorded, fully transcribed and analysed using the NUDIST software package for qualitative data analysis (Richards, 1997). Successive efforts to 'reduce' the data to a manageable number of core categories – which adequately reflected the dominant themes underlying informants' accounts of their experiences and perceptions of community – resulted in the final categorisation of the interview data within the broad categories outlined in Table 1. (See Campbell, Kelly and Wood, 1999, for a copy of the interview topic guide, and a detailed account of the process of data analysis).

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Below we provide an account of interview findings within each of the categories listed in Table 1. These categories serve as framework for the paper's goal of highlighting ways in which Putnam's concept of social capital needs to be developed if it is to serve as a useful conceptual tool for characterising peoples' subjective experiences of life in their local communities in an English context. As has been mentioned, on the whole, informants' accounts of community life were similar across the two wards. Except in cases where we specifically refer to inter-ward differences, our accounts of community life presented below draw interchangeably on interviews with residents of both wards.

Findings

1. Subjective perceptions of community

People spoke of a decline in community compared to 'the old days'.

The woman leaning over her gate with her pinny on having a natter with someone, like everyone knew everyone else. You must have heard it no end of times, people saying they never used to lock their doors, but that's how it was. (Ward 2, man, 42 years old)

We were not concerned with the historical accuracy of these accounts, given the common tendency for people to romanticise the past. Rather, we regarded these idealised accounts of the past as rhetorical reference points, used to highlight those aspects of contemporary community life that our informants sought to draw to our attention in their accounts of life in their ward. People spoke of three aspects of community relationships that had declined: trust, neighbourliness and reciprocal help and support.

Trust

People frequently spoke of a perceived decline in trust of others -- particularly in relation to crime, and anti-social behaviour by children and young people. In relation

to crime, informants felt that in general, people were far less honest and trustworthy than they had been in the past.

With a new neighbour - at one time you would go over, talk to them, say come in and have a cup of tea while your stuff is being unloaded. Not any more. You let them into your house, and the next thing you know, its been robbed. (Ward 1, man, 52)

People said that they felt that they and their children were increasingly vulnerable to muggings, burglaries and what they referred to as 'sexual perverts', and also to the random effects of mischievous or malicious children young people.

Levels of trust between the old and the young were said to be low. People spoke of being intimidated by young people hanging about the streets in large groups.

You have to be tough and assertive to survive here, or the teenagers and children would make your life hell. (Ward 1, man, 46)

I would always be wary of the groups of children outside the shops, I simply don't trust kids these days. (Ward 2, woman, 50)

Young people were aware of their negative image and sometimes expressed bewilderment about this.

Older people, they don't respect us. We can't do nothing right in their eyes. We go to one place and they tell us to go away. We go to another place and other old people moan about us. One person last week even phoned the police on us - yet we weren't doing nothing wrong at all. (Ward 1, man, 16)

A big group of us were hanging about outside the co-op and one old woman wouldn't come out of the shop until we had gone. She was scared we were all going to jump her they always think we are going to hurt

them - why do they think this: we would help them if anyone was trying to mug them. (Ward 1, woman, 15)

One effect of this lack of trust between generations was to make adults unwilling to look out for other peoples' children or teenagers as they had in 'the old days'. This was either through fear of abuse or retaliation by the children themselves, or through fear that the parents would see them as 'interfering'.

In both wards, this lack of trust in relation to both crime and young people meant that many residents were reluctant to walk around the streets, particularly at night. As will be seen below, this fear made people less inclined to participate in local activities, particularly those held in the evening. It also meant that parents were continually worried about their children or teenagers falling victim to either harm or bad influence if they were allowed to play in streets, parks or other public spaces.

Neighbourliness

With regard to neighbourliness, there was a generalised yearning for what people remembered as the easy sociability of the past. This included contact such as greeting one another in the street and chatting over the fence. In their accounts of the idealised past, high levels of trust had gone hand in hand with a culture of neighbourliness. While our informants felt that neighbours could still be relied on to provide help and support in emergency situations (such as accident, illness or fire), they were unanimous that there had been a decline in the culture of positive social exchange between neighbours. People spoke of the days when neighbours had had easy access to each other's houses for example. As one informant said, "there was never a front door or a back door locked, we were always in each others' pockets in those days".

You don't have neighbours any more in the sense that we used to understand it. No one will pop around and say 'I have just nipped in for a cup of tea and see how you are'. There's no neighbourhood. Nowadays you see people walk by, you know if you say 'Hello' to them they look at you as if 'What does he want?' (Ward 1, man, 50)

One older woman spoke at length of her hurt and bewilderment at the reluctance of her new neighbour (a young woman of three small children) to return her welcoming greetings in the street.

Youngsters these days are brought up not to trust people, they think if you are greet them you have an ulterior motive. These days so many people live far away from their families, and everybody needs a Nan figure. If she got to know me, she could come and knock on my door if one of her children was screaming and she didn't know what was the matter, and I would look after the other children while she sorted the problem out. (Ward 2, woman, 65)

For men an important dimension of neighbourliness in 'the old days' had involved interacting with other local men in the community pub, and many referred to the pub as having been their own fathers' major social network.

There is no one around here I could suggest going out for a drink. I largely keep to myself and live my own life and let others live theirs. The rare occasion I go to X (*the local pub*), I go in, people turn around as I walk in the door, and then just turn away. I buy my drink from the bar and sit down on my own. (Ward 1, man, 46)

Hand in hand with this decline in neighbourliness was a decline in 'manners' between local people. People regretted the declining custom of queuing for buses in an orderly manner, for example. References were often made to what people perceived as increased levels of aggression that might intrude unexpectedly into the most minor encounter.

These days I would only smile at someone in the street if I knew them, smiling at a stranger might earn you a mouthful of abuse. (Ward 2, woman, 35)

Reciprocal help and support

The neighbourliness of 'the old days' was not confined to congenial social companionship. It also had a practical dimension ranging from minor acts of practical support to major shared responsibilities on a long-term basis. At the minor level, with relatively restricted shopping opportunities, borrowing small amounts of food had allegedly been common.

The door wasn't locked, and if say Mrs M upstairs wanted to borrow some milk or a bit of sugar, she'd pull the door open and go 'cooee' and come in. (Ward 1, man, 46)

Under some circumstances, loans of money or borrowing clothing had taken place.

The neighbours were good, very helpful. If you were short of bread and butter you had no problem getting it. Or if you were short of a few bob to get something, they would help you out and then you would just pay them back as you were going along. (Ward 2, man, 53)

Emotional support had also been far more frequently on offer in cases of bereavement or personal stress. In cases of illness or death, neighbouring women would take on even bigger tasks and responsibilities for neighbours who were in trouble or needed help.

When I was a kid and my gran (*who brought him up*) was ill, the neighbour would come in and make sure us kids were up, breakfast, dressed and ready for school. You don't get that any more. (Ward 1, man, 50 years)

Several doors away the wife died of cancer. Well men didn't really know how to bring children up in those days, and in that sense the kids were brought up by the neighbourhood. People did look out for other people. (Ward 1, man, 52)

A number of informants contrasted community in the present day with the days where people would help one another with no expectation of reward.

People don't help each other out and I think that's terrible. I do lots of favours for people in my workshop now that I am retired, yet people moan at me for helping others out. My daughter says, 'You must be daft, doing all that ...' but years ago that's how it was. You helped me, I helped you, that's the way things used to go on. But people don't do that today. Everybody wants some reward for what they do. (Ward 2, man, 69)

Reasons for this decline in positive social virtues

People ascribed this decline in positive social virtues to a decline in common social identity. They said this was due to changing living conditions which undermined community contact: better transport, commuters working away from home, better shopping opportunities outside the area, less time and more daily stresses meant that local people had fewer opportunities to get to know one other. This decline of common identity was also ascribed to changing community composition. People said that in 'the old days' there was greater within-community homogeneity in affluence, ethnicity and religion. Community members had 'far more in common', even with those they had never met personally, and this had served to encourage the easier sociability of the past. In addition recent years had seen the loosening of oldfashioned community constraints on children and young people. People spoke of a time when there had been consensus between parents, other adults, teachers, the police and the criminal justice system regarding appropriate behaviour for young people. As modern society became more differentiated in its views on discipline and authority, these various sources of authority no longer operated in a consistent or unified way – with adults, particularly the elderly, often feeling threatened by the conduct of unruly young people.

2. Community network types

Our informants spoke of three types of networks. These included informal face to face networks of relatives, neighbours and friends; voluntary associations related to leisure, hobbies, personal development (such as pubs, sports, brownies, church or mothers groups); and formal and informal community groups and initiatives (such as tenants and residents associations or neighbourhood watches). Putnam's definition of social capital refers overwhelmingly to the second and third network types. In both our wards it appeared that these networks played a relatively minor role – as opposed to the dominant role of the first type of network. Here our findings echo the work of Pahl (1996) who has emphasised the dominant role of friendship networks in contemporary English life.

Informal networks

The main features of informal networks of friends, neighbours and local relatives were their micro-level nature. The trust and reciprocity associated with such networks was confined strictly to people that one knew personally, in opposition to Putnam's notion of trust extending even to those community members one did not know personally.

I've had good help and support from close friends – but I would never think of turning to rely on any old Fred Bloggs just because he lived across the road. (Ward 2, woman, 31 years)

Another feature of such informal networks was there strongly gendered nature. Not surprisingly it was women who played the key role in creating, sustaining and accessing informal social networks at the local community level. Married men tended to access these through their wives if at all – what friendships they had were less intimate, and often linked to work or non-local social and sports clubs. The only men who drew directly on these otherwise women-generated local networks tended to be men with sick spouses or divorced or widowed men. These were men who needed support either with child-care or else because of their own health problems or old age.

Several factors were said to enhance or undermine the likelihood of people forming informal networks with neighbours. Many interviewees referred to length of residence as a key factor in shaping close local networks.

I just love it here, I have always lived up here, so I am used to it ... I'm well known because I've lived here so long, I know everyone and they know me. (Ward 1, woman, 76)

Some people referred to the way in which increasing mobility of people in and out of neighbourhoods undermined the possibility of such bonding.

People also referred positively, sometimes even enviously, to the way in which ethnicity tended to bind sub-groups within the community, using the Irish community as an example of a supportive local network. And another factor generating a sense of community was said to be that of overlapping group memberships. The more one's networks overlapped, the more likely one was to make contact with people.

At church we end up talking to parents of kids the kids are at school with. At the kids' school there is a man who works with me on the buses, so often I will talk to him while we are waiting. (Ward 1, man, 46)

People also referred to a range of obstacles to the development of robust neighbourhood networks. These included the 'emptying out' of the community during the day as growing numbers of people worked increasingly far from home, and conflicts over issues such as noise or the use of communal space. People often referred to conflicts (often serious) developing between local residents over children's ball games that sometimes damaged neighbouring gardens or broke windows.

Other obstacles to local neighbourhood cohesion were competing priorities, with several people saying that while they might want to be neighbourly in principle, they simply didn't have the time.

If a person is in trouble you might really want to help them, but sometimes there's only so much you can do – you are constrained by how much you have to work and by your duties to your family. You can't talk forever to a depressed neighbour – because the meal won't get cooked, and the homework won't get done – it simply wouldn't be fair to the rest of the family. (Ward 2, woman, 35)

Most people look out for their own interests. As it has become harder for people to make a living, and the amount of time they need to put into it leaves less and less time for other things. You are forced to be inward looking, especially if you have a young family. (Ward 1, man, 52)

There was also much talk about the 'do's and don'ts' of boundary maintenance between neighbours. People spoke of how jealously many people guarded their privacy, inhibiting others who might have wanted make friendly or supportive gestures to neighbours through fear of being regarded as "busybodies".

Society has changed. I see the local children playing in the street, if it starts raining hard I would be reluctant to ask them in, as I would have 20 years ago. People have such funny ideas – they might think I was being a busybody, or ask why I didn't send them back to their own homes. You get to a point where you think: 'well I'll just ignore them', which isn't in my make-up. (Ward 2, woman, 65)

The issue of maintaining the correct distance from others was a complex matter.

It is important not to interfere ... interfering is insisting you will do something to help even if you get the vibes that they don't really want it. It's difficult. You have to read peoples' body language. I mean, usually if you were to offer to do something for somebody they would say no straight away, even if they really wanted help because they wouldn't want to be seen to be so keen. And you would have to insist a bit, and then if

they gave way it would be OK. But if they really said they were adamant, and you went on and on -- that would be too much. (Ward 2, woman, 35)

People spoke of the potentially unintended consequences of making friendly gestures, including that one might get "stuck" with uncongenial neighbours that one could not get rid of.

One should be wary of everyone at first, and not get friendly too quickly. If you do get friendly with some people you can't get rid of them. Its too late if you find there are things about them you don't like. (Ward 2, woman, 56)

Another unintended consequence of neighbourliness was the fact that offering emotional support could become exhausting and burdensome.

Every night, our neighbour a widower who was bed-ridden would give me a ring, and I would have to sit with him for a couple of hours. I didn't mind doing it, but it got a bit much when I said 'I have to go to the club' at 8pm one Friday, and he said 'Stay here with me rather'. I thought 'Hell this is getting tedious, he'll have me in here 24 hours a day'. (Ward 2, man, 75)

The greatest obstacle to the development of informal networks of friends and neighbours was referred to by those who lived in the tower blocks in Ward 2. As we will argue below, social capital is not a homogenous resource equally available to all members of a geographical community. Not only was its gendered nature particularly noticeable in our interviews, but also its differentiation across different housing types. Compared to people who lived in privately owned properties or council houses and small flats, tower block residents spoke in stark terms of the obstacles to community in these huge, ugly and impersonal living spaces. They said that the social stigma of the place (exacerbated by sensationalistic and inaccurate media reporting of some disturbances in the tower block area some years previously) had undermined the possibility of a positive sense of neighbourliness. Tower block informants regretted

the lack of communal spaces, and the impersonal anonymity of residents. Such factors combined with the rapid turnover of inhabitants, led to what they described as a lack of caring and interest in each other's affairs.

I worry about my child growing up in these flats. Here we are very isolated. There's no communal areas here, no place or reason to interact with anyone. You can't have community in a tower block. (Ward 2, man, 42)

In short the likelihood of participation in informal networks was shaped and constrained by a variety of factors, ranging from limited personal resources (time and energy), to matters of social etiquette linked to satisfactory boundary maintenance, to 'demographic factors' such as housing type. Much evidence pointed to an array of obstacles standing in the way of the type of generalised culture of local community participation which would be an important factor in the potential success of local attempts to promote social capital.

Voluntary groupings

Putnam places great emphasis on the role of voluntary organisations (related to leisure, hobbies, and personal development) in his account of social capital. Voluntary groupings played a very minor role in the interviews. Discussions of involvement in Brownies. Scouts and other church activities were minimal.

People referred to a variety of reasons for lack of involvement in voluntary organisations. Reference has already been made to the fact that peoples' fear of going out at night hindered their involvement in local organisations, many of which met in the evening. There was also a perception that such activities often generated gossip.

The Community Caff - I would never go there, bunch of gossip mongers ... That's also why I avoid exercise classes at the community centre – I don't want everyone there to know that I want to lose weight and start talking about me. That's the way I think about community activities. (Ward 1, woman, 36)

I don't think there is a community any more. Some people do meet in the community centre, but all people do there anyway is slag off the council or slag off the neighbours. (Ward 1, man, 50)

Furthermore, in both wards the local community centres were seen to have been monopolised by particular exclusive cliques of community members, who made others feel unwelcome.

I used to go to that club with my neighbour, but we didn't feel happy there. Of the 30 ladies there were three groups of 10 who sat together and knew one another and you feel like an intruder. They talked to us, but we weren't sort of invited to join in and become part of them. We always felt like outsiders on our own, and eventually we dropped out. (Ward 1, woman, 76)

Apart from these community centres, there were few other localities for meeting. Older residents in Ward 2 referred nostalgically to a local factory's social club, which had played a key role in community bonding until some years previously when the factory had closed the club to use the space for offices.

We used to have a lovely social club but its like everything else, nothing lasts forever. That was a terrible crime when they closed their club, it broke all our hearts up here. (Ward 2, man, 75)

Reference has already been made to the role that the local pub had played in their fathers' social lives, and frequent reference was made to the way in which the character of pubs had changed.

Pubs these days tend to cater for younger people, and younger people don't stay in one place long enough to knit together into a community. Also, since the drink driving laws people have got into the habit of going to the off-licence on the weekend and then getting a video – possibly that's not good for building community. (Ward 2, man, 70)

Just as modern lifestyles deterred people from contact with neighbours, they also militated against involvement in community organisations. Most people had family and financial responsibilities that made them too tired or too busy to go out.

I think times are hard, and people are so busy just surviving really a lot of the time – there's no time for community. (Ward 1, woman, 65)

I eventually gave up being scout leader, it took up all my time, and my husband felt it was unfair, me going off all the time. I used to get into terrible trouble. I would come home from work and say I was going to the Scouts and my husband would say: 'O you're not going out again are you?' So for doing good one got punished in a way. (Ward 2, woman, 65)

I don't want to spend a load of time in the evenings going to local meetings, and I don't have a lot of time during the day – what with working part-time, housework – I do like talking to friends, but then you don't get anything else done. In the evening I think it is important that the family all sit down and have a meal together, and then watch a bit of telly together before its time for bed. If me or my husband had to go out to

meetings on a regular basis it would take away from family life. There is an opportunity for me to go to church meetings on a Wednesday night – but I am too tired, and I don't want to go away from my family – I would rather stay at home. (Ward 2, woman, 35)

Too few community activities appealed to families.

PTA activities, quiz nights, things like that – not well attended because men wouldn't want to go to those, and women don't want to leave their husbands at home. Whereas once when they did a Treasure Hunt, for the whole family, this was really well attended. (Ward 2, woman, 35)

There was general agreement in both wards that involvement in community groupings was a good and noble thing in a general sense. However, individuals tended to have little energy left for the community after they had paid the mortgage, serviced the children and the house, and tried to spend some time with the family. Within such a context, people who devoted time and energy to the community were sometimes even regarded with suspicion – 'mugs', inadequate people who had too much time to fill, people who simply did it as a way of showing off and aggrandising themselves in some way. There was no evidence for a culture of voluntary participation in community activities of the kind presupposed in Putnam's conceptualisation of social capital.

Putnam gives a central role to voluntary organisations in generating those relationships of trust, reciprocity and local identity that form the backbone of his characterisation of the 'cohesive civic community'. Our interviews highlight the limited role of that such voluntary organisations play in the lives of our informants. Below we will argue that this finding highlights an important limitation of Putnam's notion of social capital to serve as a conceptual tool for characterising local communities in England.

Our findings regarding both informal and voluntary networks echoed the views of community sociologists such as Pahl (1996) who have long challenged the un-

problematised assumption that communities are located within geographical boundaries. Several of our interviewees themselves explicitly challenged the researchers' choice of geographical wards as sites for their study of 'community', pointing out that many residents in their wards travelled to other geographical locations for school/college, work or shopping. They also pointed out that the mobility of contemporary life meant that some people might move house several times over the course of their lives. In such a context, many of peoples' significant social networks might be located beyond ward boundaries -- both in terms of friendship networks and in terms of links with old churches or work-related groupings.

Community activist groupings

In both wards, formal politics had little relevance to peoples' lives either at the level of local council, or national MPs. A number of factors were linked to this lack of interest. Firstly – apart from the common complaint that the community lacked adequate leisure facilities and meeting places, particularly those for children and young people – informants appeared to be neutral or satisfied in their views of local government services and facilities.

I don't have a lot to do with the council. They take our tax, and come and collect the bins on a Friday, it's not something I think about much. (Ward 2, woman, 32)

I am satisfied - the council try - parking , waste bins, the things we complain about get done. This is generally an easy place to live, like everyone else if an issue does not affect me I leave it alone. (Ward 2, woman, 65)

This satisfaction represented the fact that people took such services and facilities for granted. The only informants who had strong (negative) views of local government and services were two people who were having trouble with accessing benefits.

Unless something went wrong people seldom thought about local government or community issues, either critically or otherwise.

In terms of Putnam's emphasis on active citizen involvement as a key component of social capital, peoples' relationship with local government and services tended to be a passive one. People approached these in the spirit of client-provider. There was no sense in which people felt that they had any active involvement or representation in the way in which such services were designed or provided. Furthermore, their attempts to complain on occasions where the services appeared to be functioning inefficiently almost inevitably met with frustration. People did not feel that service providers had an interest in hearing their views.

When I try and phone the council I spend 20 minutes listening to a bloody musical cassette, and then I usually get bored and hang up. That's a reflection of how interested they are - they don't want to know. (Ward 1, woman, 33)

Also in both wards, there was a thoroughgoing cynicism about politicians, both in terms of their perceived lack of integrity and calibre, and in terms of the perception that politicians had little interest in representing the interests of their constituents.

My view of politicians? Totally and utterly disillusioned. They should all be taken out and shot. Everybody lies to get votes 'I'll do this, I'll do that', and then the first thing they do is put their own salaries up and we get nothing. (Ward 1, man, 50)

This lack of faith in the political process was not presented as a critique of particular politicians or political parties. It took the form of a deep cynicism about the intrinsic power of any aspect of local or national government to reflect the needs, interests and views of ordinary working class citizens.

However, despite these similarities in the views of residents of both wards regarding politicians and local services, there was one striking difference across the two wards.

This concerned peoples' perceptions of the power of ordinary citizens to influence the course of events at the local community level. Informants of Ward 1 had far less confidence in the power of ordinary people to influence the course of events than informants in Ward 2.

In Ward 1, people repeatedly expressed a generalised apathy about getting involved in local political issues.

I have often found that I am full of great ideas, but then when it sort of comes to saying to myself 'Well I could go to that meeting and put forward my opinion', I say to myself, 'No, what will happen is that I will get roped into something I don't really want to do.' And I have never felt strongly enough about an issue to actually go to the council or an MP (Ward 1, man, 42)

People aren't interested in the affairs of Ward 1. Many of us are single mums battling to survive. We have our personal worries to deal with – politics is very distant – nothing ever happens for our good in politics anyway. (Ward 1, woman, 34)

Ward 1 appeared to be characterised by a culture of 'moaning' and inactivity.

I am boring, aren't I? Its just that I moan that there isn't anything for the kids or teenagers to do, but I'm not willing to do anything about it. If everybody thinks like I do and nobody wants to get involved, then there's never going to be anything here, is there? (Ward 1, woman, 36)

Unlike Ward 1 informants, people in Ward 2 referred to a number of examples of successful small scale community activism, where residents had influenced local affairs. These small battles included relatively 'easy' achievements such as individuals successfully lobbying the council to repair play equipment in the park; successfully approaching the council to put bollards at the end of a local footpath to slow down children on bicycles who had been endangering pedestrians; and

persuading the council to build a pedestrian path along a muddy grassy walkway besides a busy road. These little victories had engendered a great sense of satisfaction amongst residents.

Well I got that path put in on the main road, see it over there – its mine! (laughter) There is no speed limit and a country road comes into the area, so people fly down here. I got caught one night and hit my elbow as a car came speeding round the bend. You had to walk in the grass and the mud to avoid them. I complained and they came around and inspected it and put that tarmac down. (Ward 2, woman, 56)

These local successes also included more labour intensive lobbying such as collecting signatures for a petition to the council regarding a resident who was inconveniencing neighbours by keeping a large bulldozer parked outside his house. An even more significant and successful achievement was the yearlong campaign mounted by a woman informant against a local factory that was causing a public nuisance relating to both noise and smell. She outlined how this experience had taught her a range of lobbying skills, and it had clearly given her a positive sense of active citizenship.

The trick is to follow the chain of command rather than trying to go straight to the top. If you don't get joy from one person, go to the next one up, and just keep going, go on keeping on – and you can get things done. You can change things in that way – people do that around here, and succeed. (Ward 2, woman, 45)

The local authority man was very helpful and gave me his phone number and if ever I had problems again I should phone him immediately and they were monitoring the problem. So he did seem genuinely helpful, and interested. I always feel I can go to them if I need to. (Ward 2, woman, 45)

Another woman from Ward 2 spoke of a campaign to stop big lorries from using her road. Although she too portrayed this as a strictly one-issue campaign, it had clearly left her with a sense of empowerment as a Ward 2 resident.

We whipped up a big storm and got the newspapers to come in, because we didn't want our children to be hurt by the big lorries going to the building site. We also had petitions and everything. And we did it – we won – then we all got back into our little houses and hid! But its amazing what you can do it you work in a united way. (Ward 2, woman, 32)

Attempts to get involved in community action were not always easy. One Ward 2 woman spoke of the difficulties facing ordinary people who sought to organise community activities.

Its difficult to organise things at the local level without organisational back-up – things like access to computers and photocopiers. On the PTA for example on sometimes feels its separate from the school –the school wants the PTA, but doesn't want us to use the classrooms for the meetings, or to borrow their copier. (Ward 2, woman, 35)

When you try and set up a group really you are on your own – you don't get support from the council or anyone, this problem puts people off organising things. Having to hand-write 20 notices for a mothers' coffee morning group because you don't have access to a computer, this all take a lot of time we don't have. Community things rely on people who are willing to give up an awful lot of time to do them. (Ward 2, woman, 35)

Not one Ward 1 informant referred to any similar attempts at mobilisation or lobbying. Furthermore, the local Tenants and Residents' Association (T.R.A.) featured strongly in our Ward 2 interviews, which was not the case in our Ward 1 interviews.

Repeated references to the T.R.A. in Ward 2 interviews were not necessarily motivated by personal involvement, or associated with approval of the association. Thus for example, not one of our Ward 2 informants was actively involved in the T.R.A. Attitudes towards it ranged from extremely positive to the negative, and none of our informants mentioned any concrete victories it had achieved on behalf of its members. Some referred to association members and leaders as dominated by "a bunch of old fogeys", who did not represent the perspective of younger community members, but who were able to dominate the association because, as pensioners, they had time to attend the meetings. Others commented cynically that small local groupings had no power to challenge decisions made by the government or council (referring to an unsuccessful T.R.A. attempt to stop a traffic roundabout being built). They also had no power to challenge big business (referring to an unsuccessful T.R.A. attempt to stop a factory from being built in a problematic location). Despite this, the T.R.A. was a frequent reference point in peoples' accounts of their day-to-day lives in the community, and its existence certainly had some symbolic significance for community residents. People clearly appreciated the fact that there was a local forum that had their interests at heart.

I have heard it is quite active, but I don't know anybody in it. Its nice to know that it exists. I haven't got the time to be involved myself, but it feels good that there's a R.A. looking out for things in the community. (Ward 2, woman, 31)

And in Ward 2 even those who weren't involved in community issues still saw the benefits of community action and were slightly embarrassed by their lack of commitment.

My friend C is very active in the R.A. but there are too many of us that just sit back and do nothing. I must admit I am guilty of that. (Ward 2, man, 53)

Some of us are a bit complacent really, I am too I'm ashamed to say. It doesn't affect me, I leave it alone, which is quite selfish really. (Ward 2, woman, 65)

This difference in what we refer to as perceived citizen power was the one striking difference in our two wards of interest, whose perceptions of community life and community networks tended otherwise to be fairly similar. Residents of Ward 1 did not refer to any examples of local activism either successful or otherwise, or any organisations and channels whereby people might express views on local facilities, services or quality of life. In comparison, many residents of Ward 2 expressed the view that ordinary people ought to get involved in local community politics. They cited examples of ways in which they might do this, and expressed the view that on some occasions this such involvement might yield benefits for both the individuals involved as well as other community members. We speculate that one possible reason for such a difference might be related to the fact that while both our wards were in the lower half of the town's socio-economic ranking according to the Townsend Deprivation Scale, Ward 1 (the 3rd most deprived ward out of the town's total of 16) was more deprived than Ward 2 (the 7th most deprived out of a total of 16 wards). In an exploratory study of participation in local community affairs in Australia, Baum et al. (2000) found that people in more deprived communities were less likely to participate in community affairs than people in more affluent communities. While much research remains to be done to substantiate whether this might be the case in England, the findings of our exploratory study are consistent with Baum et al.'s findings. The need for further investigation of the impact of socio-economic differences on the way in which people create and access positive social capital and on the likelihood of participation in local community activities is emphasised below.

Conclusion

The extent to which the experiences of our informants in our particular communities of interest - located in less affluent parts of a south England town - would generalise to people in other local communities in England is a matter for empirical investigation. Much work remains to be done in investigating community networks

and relationships in a wider sample of community types, including communities in the north as well as the south of the country, in rural as well as urban areas, and in a wider range of socio-economic environments. However, we do believe the richness and depth of our qualitative data provide a useful starting point for our interest in highlighting areas where further research is needed, if Putnam's concept of 'social capital' is to be developed into an appropriate conceptual tool for community strengthening policies.

In this concluding section we point to four particular areas for further research. Firstly our findings call into question the appropriateness of Putnam's notion of a cohesive local community characterised by generalised levels of trust and unitary local identities. Our findings suggest that such a notion might be unduly essentialist, and fail to take adequate account of the complex, fragmented and rapidly changing face of contemporary community life – characterised by relatively high levels of mobility, instability and plurality. Analysis of our particular interviews suggests that, given the increasingly plural composition of contemporary communities, and the ever-growing rapidity of social change, one cannot simply assume the existence of cohesive relationships across unitary communities of the kind that Putnam refers to.

Community relationships of local identity and trust existed in a far more restricted form in our communities of interest than Putnam's definition of social capital would suggest. They were located strictly within small face-to-face groups of people well known to one another, and did not extend to community members outside of peoples' personal acquaintance.

Secondly, our findings suggest that the starting assumption of our study, examining social capital at the level of the geographical ward, was unduly narrow in its approach. Future studies of social capital should take account of the fact that peoples' stocks of social capital reside in a range of non-local as well as local networks and associations. Many of the networks people referred to tended to be micro-locally based, often at the level of the street, or within easy walking or short driving distance from one another. Some networks crossed the boundaries of the geographical ward, however, with people being involved in a range of activities and networks lying outside its boundaries, often some distance away -- even in other parts of the country.

Thirdly our findings suggest that Putnam's typology of social networks needs to be expanded. In particular more attention needs to be paid to the relatively important role played informal networks in peoples' lives. In his definition of social capital, Putnam emphasises the importance of high levels of involvement in voluntary associations and organisations (such as literary societies and bowling leagues). Our research suggests that networks of this nature played virtually no role at all in the lives of our informants, and that significant networks tended to take the form of small-scale, informal networks of friends and neighbours. It is these informal networks which formed the bulk of the social capital available to informants in both our wards. Pahl (1996) has pointed to the relative neglect of the phenomenon of friendship in existing studies of social networks. This insight needs to be taken on board by those who seek to develop the concept of social capital.

Finally our data suggest that social capital is not a homogenous resource that is equally created, sustained and accessed by all members of a particular community. A range of sources of difference emerged in our study. Peoples' access to various forms of social capital varied by age, by gender and by housing type. Furthermore, differences in perceived citizen power amongst residents of Ward 1 and Ward 2 suggested that differences in affluence could also play a role in this regard -- an area where there is wide scope for future research. The concept of social capital has been widely criticised for its narrow emphasis on community level determinants of health. Critics argue that the growing popularity of the concept of social capital within health studies potentially diverts attention from the well-established ill-effects of non-local factors such as material inequalities on health in an era of reduced welfare spending (Muntaner and Lynch, 1999). Gender, age, socio-economic and ethnic differences in social capital are not given attention in Putnam's work. Such differences would have definite implications for those seeking to develop health promotional policies and practices aiming to enhance levels of social capital in local communities (Campbell and McLean, in press). They would also have implications for the emphasis being placed on community participation in a range of local and national government initiatives relating to crime, neighbourhood regeneration, housing and so on.

We are certainly not in disagreement with policies and interventions that seek to strengthen local communities as a means of promoting health. However, we also argue that plans to strengthen communities need to be informed by a realistic understanding of what types of community resources and networks exist as 'raw materials' for such policies and interventions. They also need to be informed by realistic understandings of factors that might promote or hinder the development of widespread participation in voluntary activities, or of generalised levels of trust and mutual support between people not personally known to one another. Our findings suggest that a range of factors stand in the way of widespread voluntary participation in local community life, or of generalised levels of trust and reciprocity between local community members that Putnam speaks of. Much work remains to be done in tailoring the concept of social capital if it is to serve as a useful conceptual tool for designing and evaluating health policies and interventions, or for research into the interface between health and social relations at local community level in England.

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TABLE 1: NUDIST CATEGORIES FOR FINAL DATA ANALYSIS

1. Subjective perceptions of community.

Types of community relationships that have 'declined'

- trust
- neighbourliness
- reciprocity

Reason for this` decline' in positive community relationships

- decline in common social identity
- changing living conditions
- increasingly heterogeneous community composition
- youth-related issues
- 2. Networks and associations constituting social capital in these wards

Network types (and factors promoting or hindering participation in them)

- informal face-to-face networks of relatives and friends
- voluntary groupings (leisure, hobbies, personal development)
- formal and informal community activist groups and networks