The Case for Holistic Regeneration

Summary of Recent Findings Across Interventions and Capital Domains March 2014

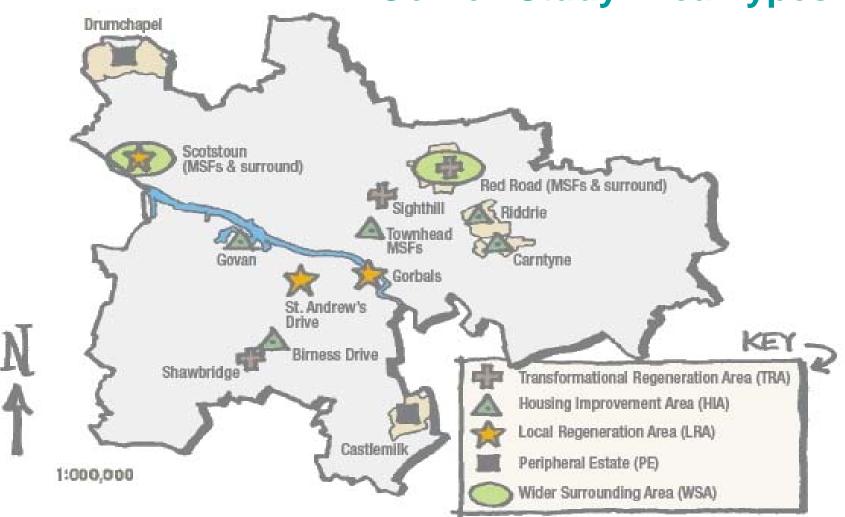


The Interventions

- Neighbourhood transformation: Demolition &/or renewal in regeneration areas. Neighbourhood improvement elsewhere.
- **Relocation**: from regeneration areas to elsewhere.
- Dwelling type change: high-rise to low-rise; existing to improved or new dwellings.
- Housing improvements: for the occupant; for the community.
- **Tenure mixing**: through redevelopment and in-fill.
- Social regeneration: interventions on human, economic, & social capital within communities.
- Tenant and community empowerment: housing; regeneration; public services.

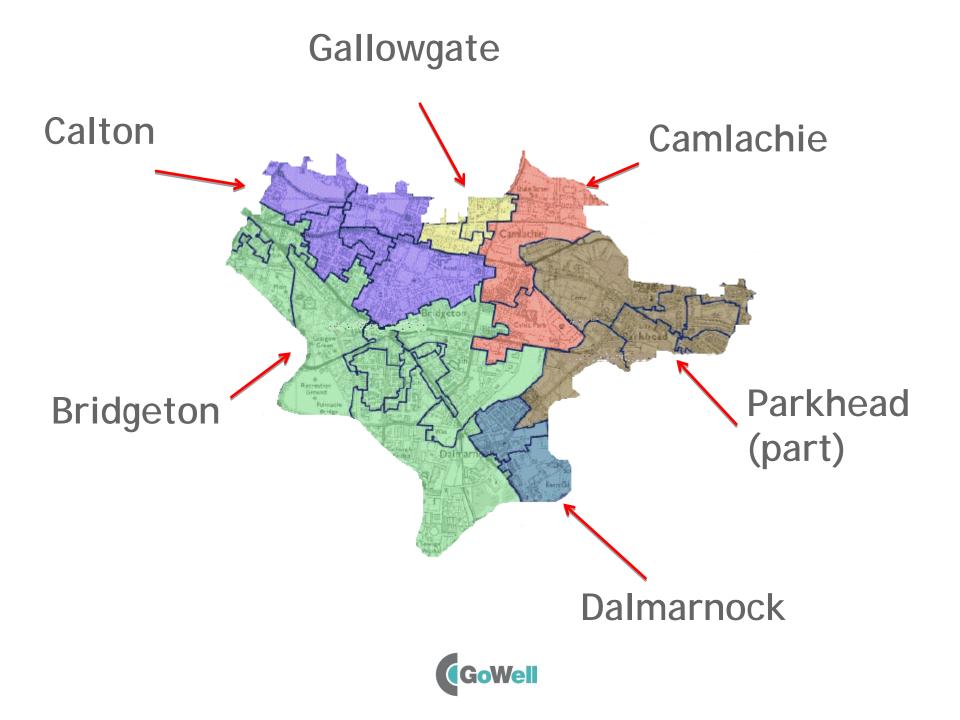


GoWell Study Area Types



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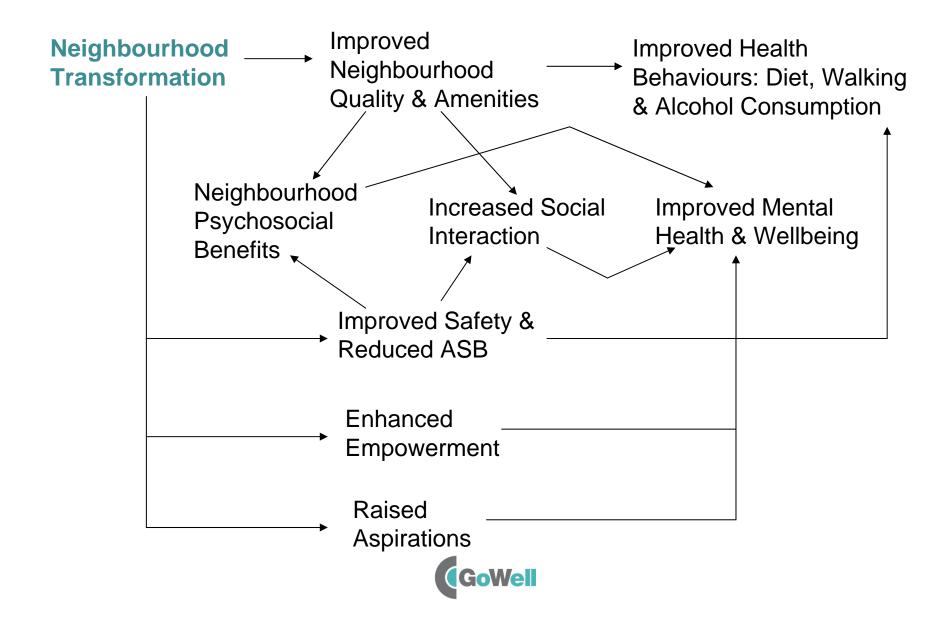


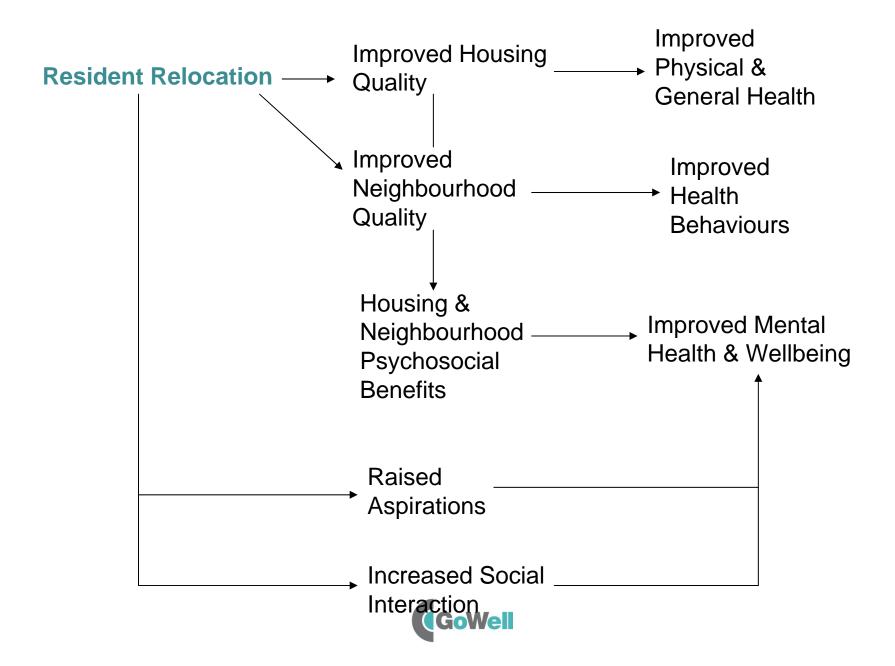


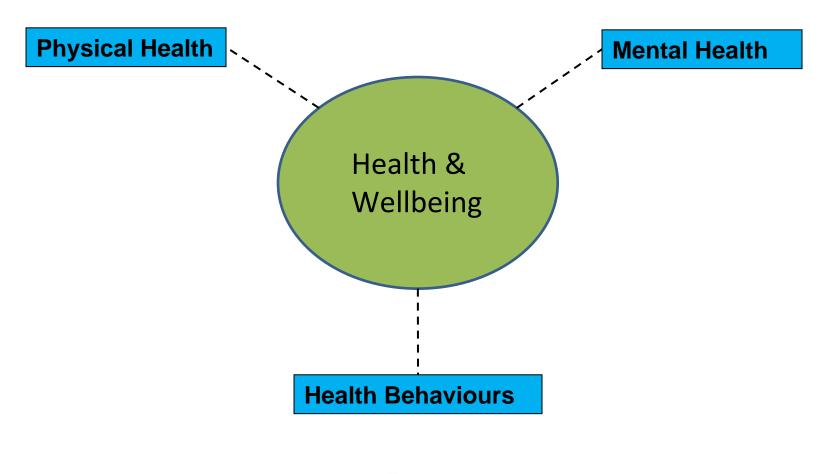
Pathways to Health & Wellbeing Outcomes

- <u>Physical and Environmental Pathways</u>: risk reduction; opportunity enhancement.
 - Where you live as an individual.
- <u>Social Pathways</u>: cohesion; interaction.
 How you live as a collective.
- <u>Psychosocial Pathways</u>: safety and trust; control; status; empowerment.
 - How you think about yourself, about others, and about where you live.

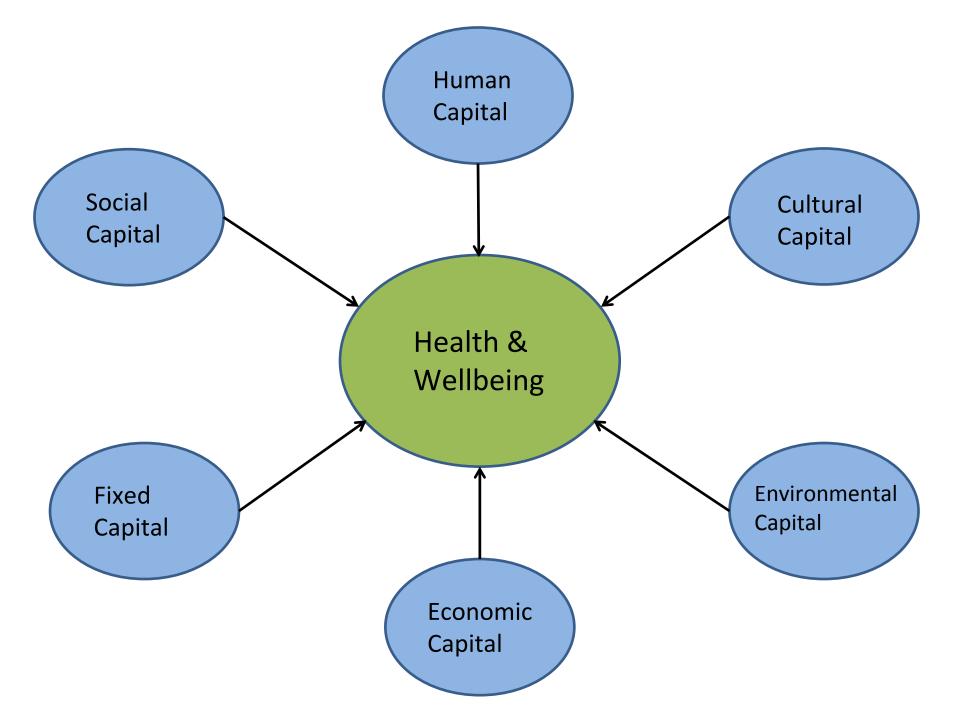






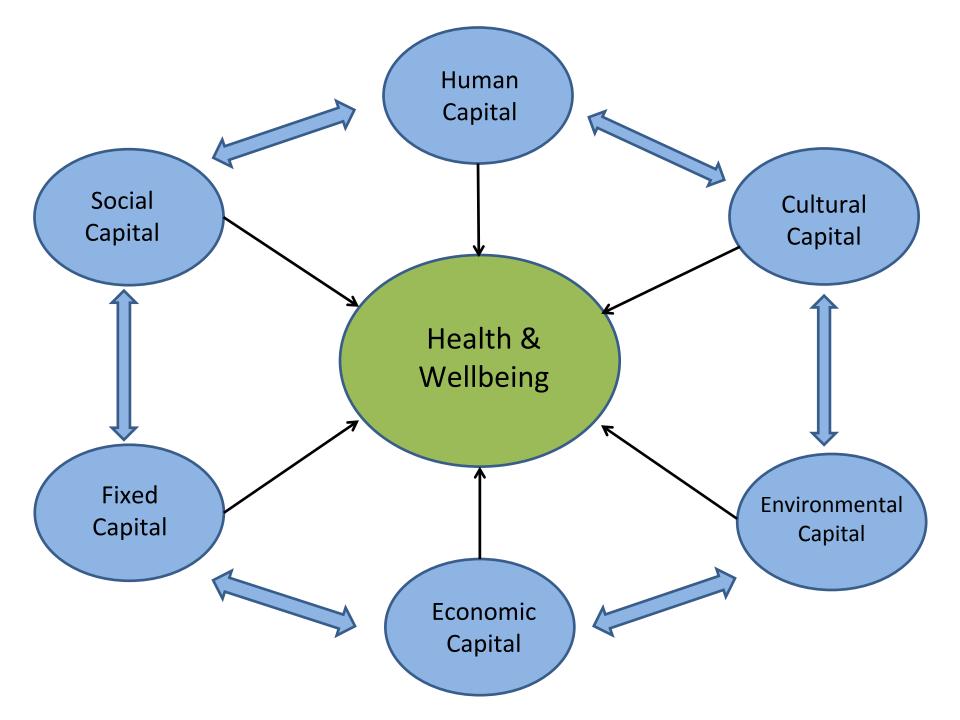






The Capitals...

Human Capital	Education. Skills. Sense of empowerment.
Social Capital	Social networks and support. Trust. Safety. Community capacity, organisations & empowerment.
Cultural Capital	Libraries. Historic buildings. Community traditions. Area reputation. Status.
Economic Capital	Employment. Incomes. Wealth. Community finance, e.g. credit unions, trusts.
Fixed Capital	Housing. Public buildings and services. Business premises. Shops.
Environmental Capital	Quality of local buildings and streets. Green spaces and natural environment.



Study components

- Community survey: 4 occasions.
- Outmovers survey: 3 occasions.
- Qualitative research: with residents; with housing & regeneration staff.
- Ecological analysis: health and deprivation indicators across communities.
- Secondary data analysis: crime; education; health.
- Economic evaluation: costs vs. outcomes.



Evidence Supportive of Holistic Regeneration

- **Three Interventions**
- •Housing Improvements
- Relocation
- •Tenure Mixing

Four Capitals

- Economic Capital
- •Fixed & Environmental Capital
- Social Capital



Intervention 1: Housing Improvements

- A major investment (£1.2bn) in fixed capital and a physical pathway to health.
- Very good progress had been made with housing improvements by 2011.
- In two-thirds of the study areas, the majority of stock had received internal works.
- In half the study areas, the majority of stock had received external works.



Townhead - before



Townhead - after



Wider Red Road

Our Sample

- 1,939 longitudinal cases where:
 - We have two interviews with same householder in same property.
 - Address could be matched to GHA housing management data-base, which records completion dates for all works to properties.
 - Includes some owners who live in GHA buildings.



Types of Housing Improvements

- % sample receiving works T1-T2 (% on its own)
- •Kitchen, bathroom, rewiring: 36.4% (17.1)
- External fabric works:
- •Secure front door:
- Central heating:

- 29.7% (11.2)
- 24.9% (8.3)
- 19.3% (3.6)
- •None of the above (control): 32.6%
- -There might be works prior to our study.
- -There are other, less common works.
- -The content of the works could vary.



Our Analysis

- Outcome Measure: SF-12 PH & MH (T2).
- Accounting for Baseline health position (T1).
- Accounting for pre-T1 treatment from 2003.
- Adjusting for Regeneration Areas.
- Controlling for gender; age (65); employment status; education; citizenship.
- Adjusting for specific survey interval..
- Including interactions for combined works.



Outcome Measures

- SF-12 Physical Health:
 - Mean baseline score (s.d.): 46.58 (11.42)
 - Mean change over time: 4.37 (13.06)
- SF-12 Mental Health:
 - Mean baseline score (s.d.): 47.92 (9.98)
 - Mean change over time: +1.16 (13.81)



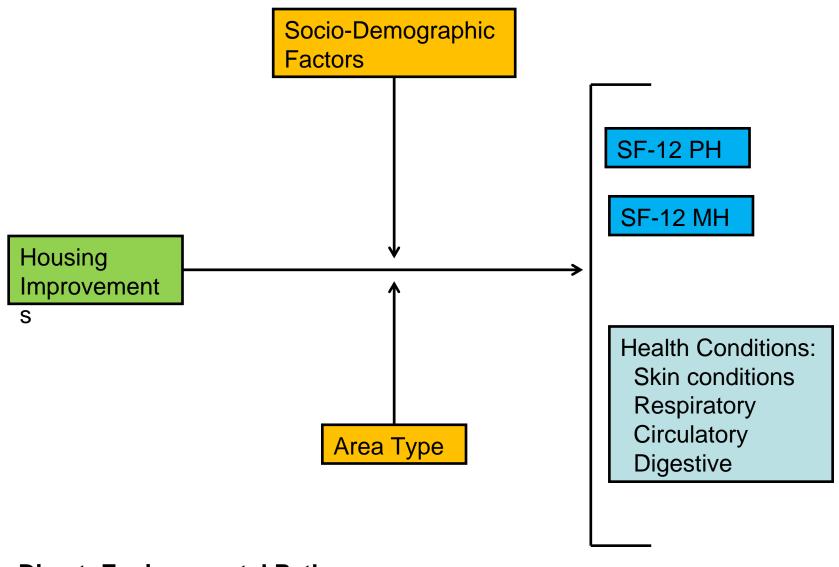
Summary of Effects

Table: Summary of Effects of Housing Improvements on Health

Improvements	Physical Health	Mental Health
Fabric Works (FW)	+ve * -ve(with CH)	+ve (with KB)
Central Heating (CH)	No main effect	No main effect
Kitchens & Bathrooms (KB)	-ve* -ve (with CH) +ve (with FW) (+1/3 s.d.)	+ve (with D)
Front Doors (D)	No Effects	+ve (with CH) (+>1/2 s.d.)

* close to significant.





Direct: Environmental Pathway



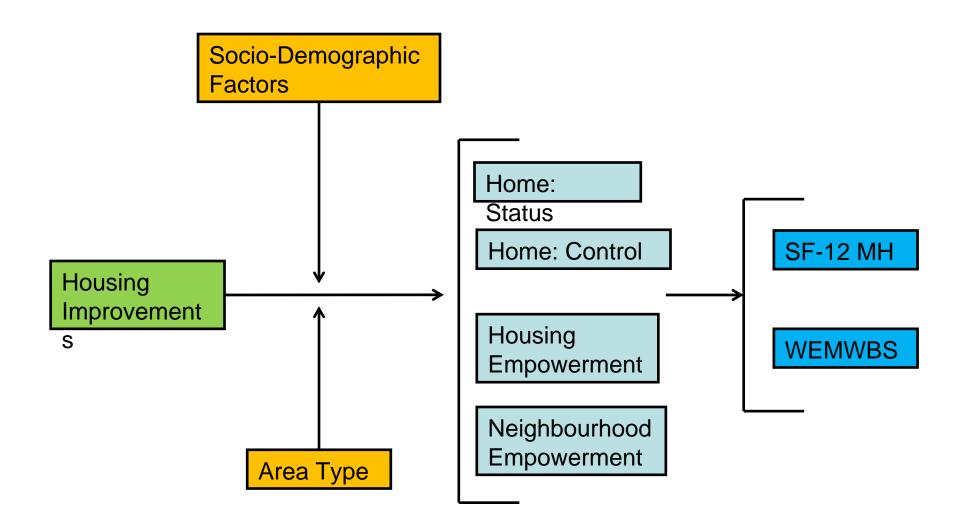
Studying Housing Improvements

- Across all study areas.
- Using the main survey: longitudinal samples between Waves 1, 2 and 3.

To come:

 Study of effects of housing improvements on occupants of high-rise flats:

– Wave 3 to Wave 4 longitudinal sample.



Indirect: Psychosocial Pathways



Then there are...Economic Factors

- Getting a job in the intervening period had a consistently positive effect upon both Physical Health and Mental Health.
- This effect was often around twice as large as the equivalent effect from any type of housing improvement.

But only 5.4% of the sample moved into employment between T1 and T2.





Intervention 2: Demolition and Relocation





Relocation

- A means of changing people's fixed and environmental capital in particular.
- Across four of our study areas, around 4,500 dwellings (c.80%) had been cleared by 2011, with many occupants relocated, usually to nearby areas.
- The highest rate of in-moving by people relocated from regeneration areas across the city is in the two Wider Surrounding Areas and in three of the Housing Improvement Areas.



The Process [staff interviews]

- Rehousing large numbers of people is a challenge, made more difficult by:
 - Complex inter-dependencies between organisations and processes.
 - The scale of rehousing across the city.
 - Lack of awareness of rehousing strategies, agreements and housing supply.
- But the ability of staff to exercise flexibility and discretion, and the absence of time pressures, enabled staff to meet most people's needs.

The Experience [resident interviews]

'Stayers'	Least happy. Still had concerns and anxieties. Reported more gains than expected, e.g. family relations. Content to remain in new location.
'Upgraders'	Reported gains in space, warmth and pride in the home. Better mix & neighbour relations and feelings of safety.
'Transitioners'	Reported mostly psychosocial gains (e.g. having a 'home' to build a future on), rather than the desired changes in activities and direction.



The Role of Health in Relocation

- Personality, mental and physical health issues, and alcohol dependency are key issues which:
- Lowered people's expectations of gains.
- Reduced their ability to take steps to change.
- Limited their social interactions post-move.
- Analysis of our Wave 3 survey data shows:
 - Outmovers are more likely than Remainers to smoke and drink.
 - There are no differences in diet or physical activity.
- Issue: Lack of post-move counselling & support.



Studying Relocation: Summary

- Looking at four of the study areas: the three TRAs plus the Scotstoun LRA.
- Using several sources:
 - The community and outmovers surveys, crosssectional samples.
 - Qualitative interviews with housing officers and relocated residents.
 - Longitudinal, qualitative interviews with parents.

Plus: Jo Neary's PhD research on young people in the TRAs. Plus: Nick Sharrer's PhD research on relocation, social housing and health in Baltimore and Glasgow in 20th century.



To come:

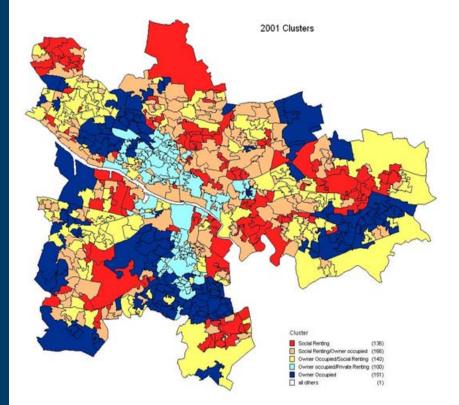
- •The effects of relocation on receiving neighbourhoods ('spillover effects').
- •Study of outmovers using longitudinal survey data, after Wave 4.
- •Looking at outcomes for children:
 - Joanne Neary's PhD thesis
 - Lived Realities Wave 3 interviews
 - GCC Education Data linked to GHA Demolition data.

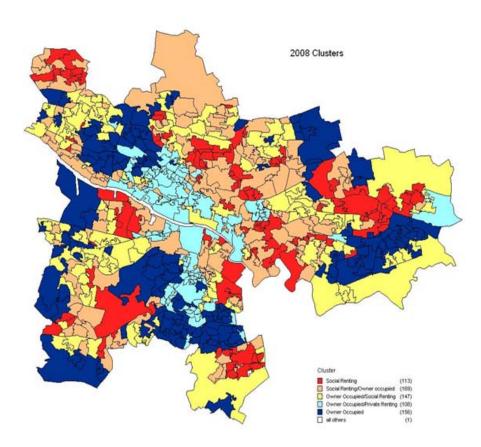


Intervention 3: Housing Tenure Mix

- A means of changing several capitals:
 - Social: e.g. enhanced control of asb.
 - Human: better health and education outcomes
 - Cultural: more mixed = less stigmatised.
 - Economic: more owners = more income and wealth in the community.
- We observed slow progress with the creation of more mixed communities by 2011 due to delayed social sector new builds and slow private sector activity.







Mixed Tenure & Crime Date

- [Scottish Police: Recorded Crime Data]
- Neighbourhoods with 60-80% social renting:
 - Lower property crime rates (2001).
 - Higher person crime rates (2008).
- Neighbourhoods with 30% private renting or social renting:
 - Higher person crime rates (2008).
- Property crime was also higher where:
 - Higher residential turnover.
 - More low-medium rise flats.



Mixed Tenure & Education

[GCC Education Services: School Performance Data]

- A ten percent increase in owner occupation in a school's catchment:
 - 30% increase in likelihood a pupil would achieve 5 standard grades at credit level.
 - 24% increase in likelihood a pupil would go on to higher education after leaving school.
 - 100 point increase in catchment SIMD rank (i.e. less deprived) is associated with 3.2% increase for exams and 2.7% increase for h.e.

Plus: Oonagh Robison's PhD research on Mixed Tenure and Education over the past decade in Glasgow.



Mixed Tenure & Health [NHS Health Scotland: Scottish Health Survey & Scottish Morbidity Records]

- Compared to neighbourhoods which are predominantly social rented (66%+), more mixed tenure neighbourhoods (25-44% social rented), have:
 - Lower levels of psychiatric disorder.
 - Lower rates of moderate-heavy smoking.
 - Lower rates of alcohol-related hospital admissions (even after controlling for area deprivation).



Are New Mixed Tenure Communities Socially Successful?



Next... GoWell East: New Qualitative Study of Residents in Dalmarnock and the Atheletes' Village, 2014 - 2016



Next... Wave 4 Survey: Shawbridge Residents





Capital 1: Economic Capital

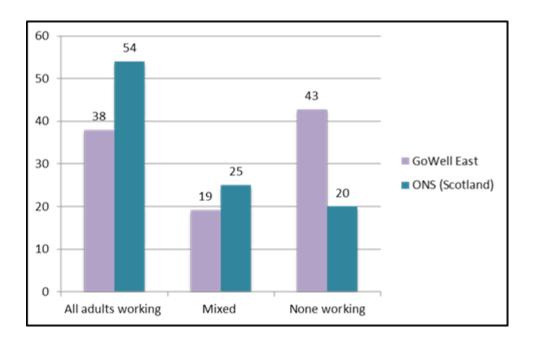
- Gaining **employment** has a positive association with health improvement.
- But, very few of our sample gain employment over time (c.5% in 3-5 yrs).
- Meanwhile, the economic downturn, austerity measures and welfare reforms may be causing financial difficulties for households with possible health consequences.



Employment in the East End

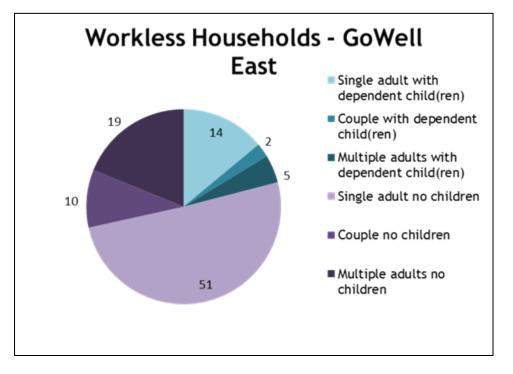
Findings from the Baseline Survey:

•86% of households in the cohort contained at least one person of age 16-64.
•Of those households, over half (57%) had at least one person in employment.
•In 43% of cases, no adults in the household were working



Households by economic activity status of adults aged 16-64 (GoWell East 2012)

Complexity of the Situation



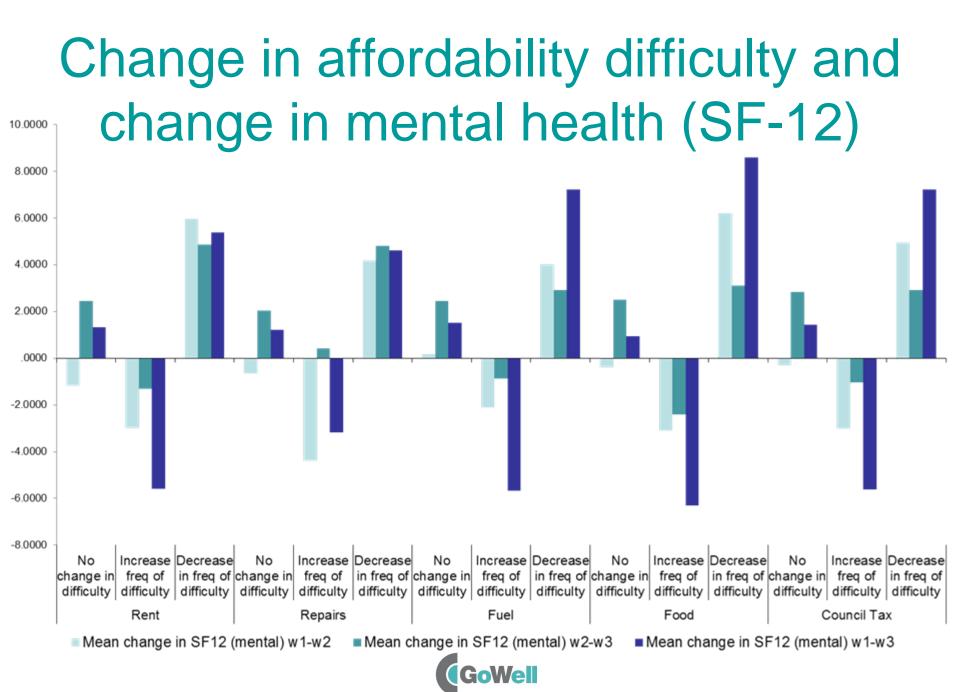
- Many of those out of work are dissatisfied with their current situation: 54% of the unemployed; 42% of the long-term sick.
- Many, but not most, of those not in work have actively searched for work in the past year: 41%
- Of those aged 16-64 who are not in work, education or retired, 63% report that they have a long-term illness or disability.

Plus: Maureen Kidd's PhD research on how the Games impacts upon the horizons of S4/S5 pupils in the East End.

"Recession"

- People in deprived areas may suffer from:
 - Reductions in employment opportunities and working hours.
 - Cuts in public services and support.
 - Dependency on welfare payments which are subject to reform post-2010.





Capitals 2 & 3: Fixed & Environmental Capital:

 The quality of the built and natural environment in neighbourhoods can affect how people feel about themselves and their lives.

 The amount and quality of services and amenities in a neighbourhood provides opportunities to live more or less healthy lives.

Resident Perceived Environmental Quality

• Using Wave 2 cross-sectional survey data.

- People are more likely to have high mental wellbeing if they consider their neighbourhood to be of high quality:
 - Very attractive buildings: 2x likely.
 - Very attractive environment: 3x likely.

Observer Rated Environmental Quality

- Using Wave 1 cross-sectional data and surveyor assessments of environments.
- Where most of the buildings showed signs of disrepair or vandalism, the likelihood of both men and women saying they were depressed most of the time was doubled.
- Where buildings and public spaces were rated as well maintained and attractive, women were 20% less likely to be current smokers.

The Retail Environment, 2006-11

Positive Changes?

MORE

•Supermarkets and general stores: +112%

•Cafes: +43%

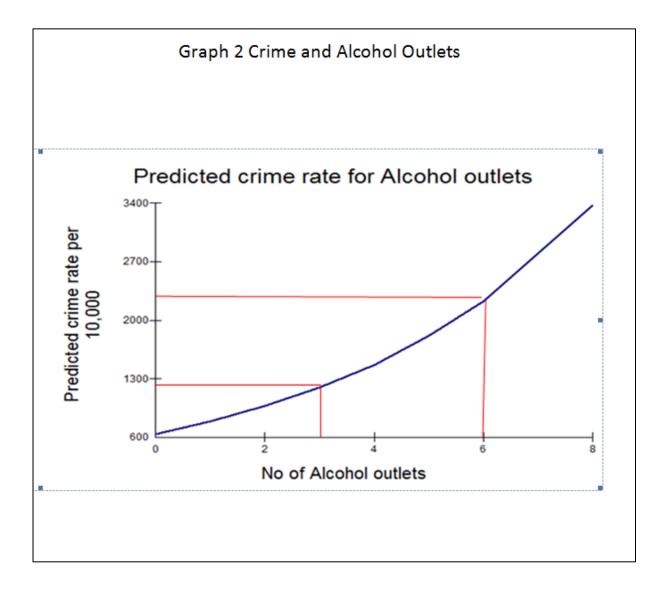
Negative Changes? MORE

- •Alcohol off-licenses:+65%
- •Fast food outlets: +21%

LESS

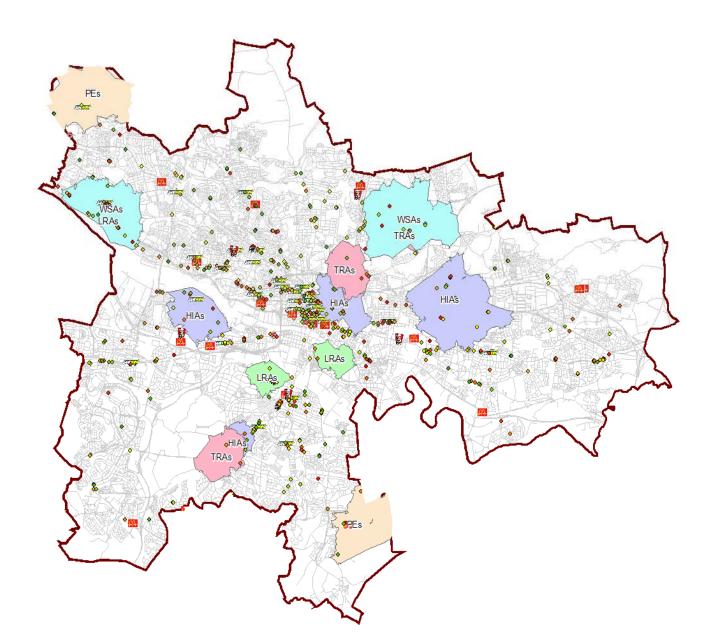
- •Playgrounds: -28%
- •Youth organisations: -18%

Why does this matter?



Data Sources: Scottish Police recorded crime stats. OS Points of Interest Data

Go Well areas and fast food outlets



Food Environment & Snacking Habits

- Combining our survey responses with secondary data on shops near our participants.
- Having a supermarket within 10 mins of home increased the likelihood that someone would not have eaten 'unhealthy snacks' (crisps, fizzy drinks).
- Having nutritious shops (butcher, delicatessen, fishmonger, health food shops) within 5 mins of home increased the likelihood that someone would have eaten 'healthy snacks' (fruit, fruit juice).



Shops in Riddrie

Capital 4: Social

 Being socially connected, having positive relations with others, and feeling supported by others are all important foundations for a high quality of life and good health.

- Why do people feel *lonely*?
- What helps people feel *safe*?

So Lonely?

- Sometimes Lonely:
 - Men: 22%
 - Women: 25%

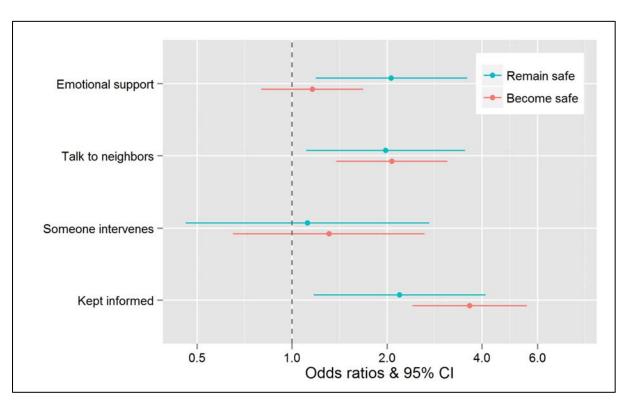
- Often or Always Lonely:
 - Men: 17%
 - Women: 15%

GoWell Wave 3 Survey, 2011.

	Associated with higher feelings of loneliness	Associated with lower feelings of loneliness	Not associated with feelings of loneliness
Living circumstances	Living alone	 Cohabiting older people; Two-parent family households 	 Length of residence in the area; Dwelling type
Personal characteristics	 No qualifications Long-standing illness, disability or infirmity 	 In work, training, education 	
Social contact, networks and behaviours	 Infrequent contact with family or neighbours Rarely talking to people in the neighbourhood Lack of sources of practical or emotional support 	 Knowing more people in the neighbourhood to speak to Use of local amenities 	 Taking part in local clubs and associations Watking frequently in neighbourhood
Perceptions of local area	 Perception of weak community collective efficacy Feeling unsafe walking alone at night-time Perception of more antisocial behaviour in area 	 Neighbourhood physical environment rated as being of higher quality 	

Safety Indoors

What social capital factors help people feel 'very safe' at home?



Services also matter:

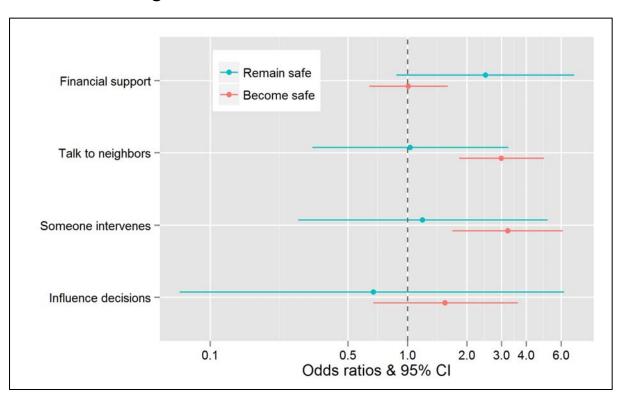
-Being satisfied with local parks (environmental capital).

-Having had housing improvement works (fixed capital).

GoWell Longitudinal Data, Waves 2-3

Safety Outside

What social capital factors make people feel 'very safe' walking alone after dark in their neighbourhood?



Also:

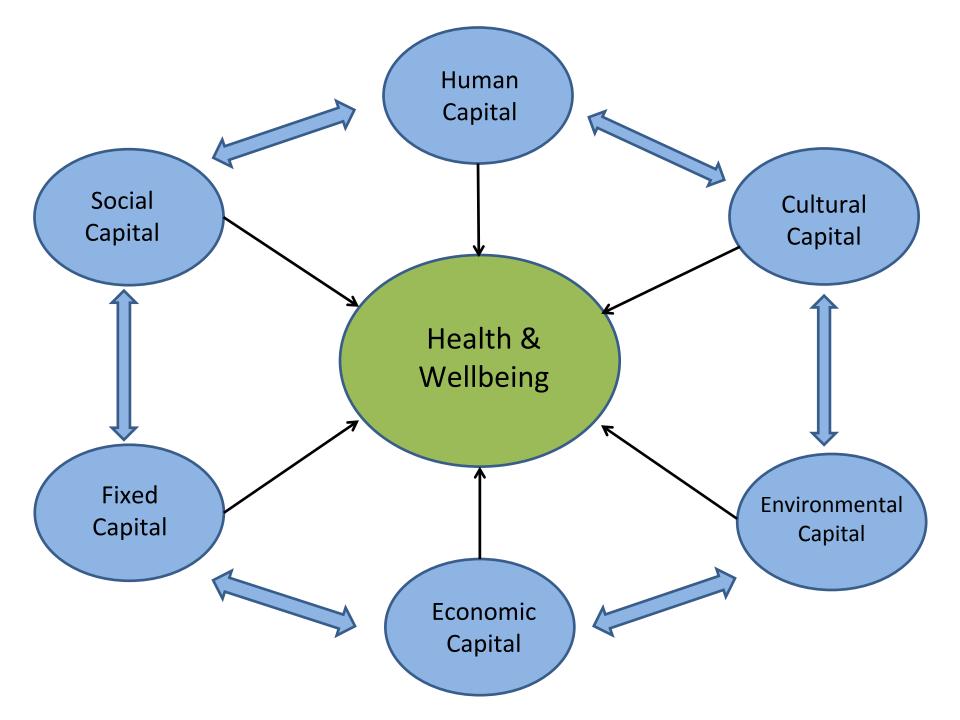
- Being 'very satisfied' with local policing (neighbourhood fixed capital). GoWell Longitudinal Data, Waves 2-3.

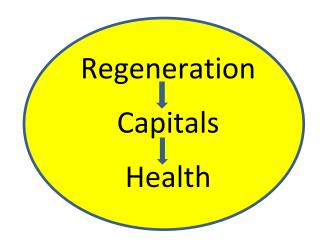
Plus: Camilla Baba's PhD research on Empowerment and Health.

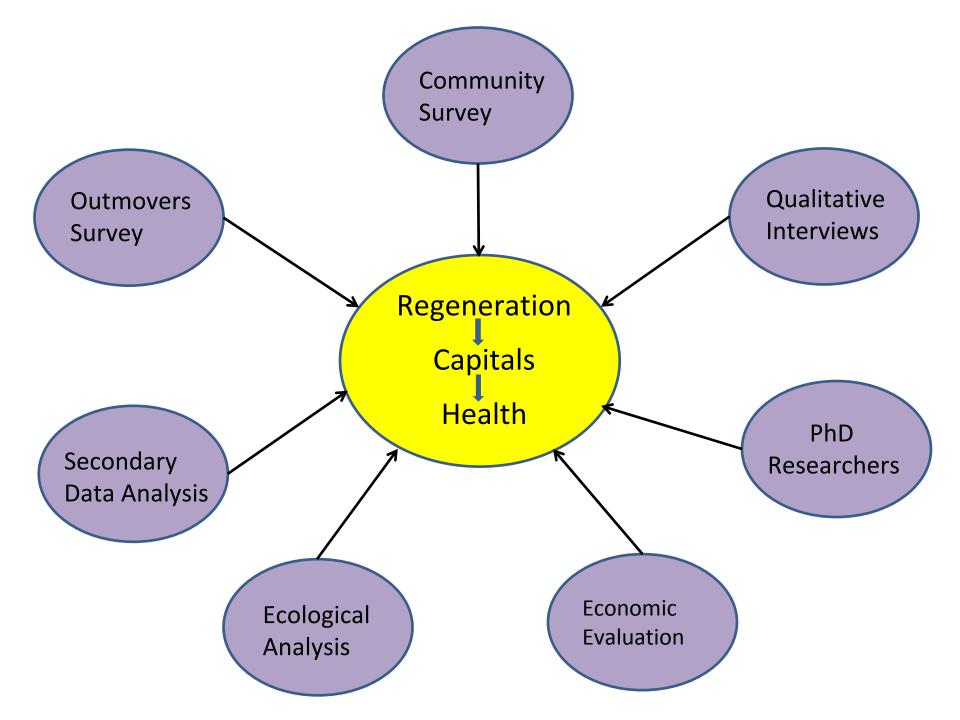
Safety & Walking

- Frequency of neighbourhood walking is associated more with safety than with crime rates:
- People are more likely to walk frequently in their neighbourhood if they:
 - Feel safe at home.
 - Feel safe outside at night.
 - Perceive drugs as a serious problem in the area.
- People are less likely to walk if they:
 - Perceive drunks and rowdiness as a serious problem
 - Perceive housebreaking as a serious problem.

[GoWell Wave 2 survey & Scottish Police crime data]











People

Place



Process

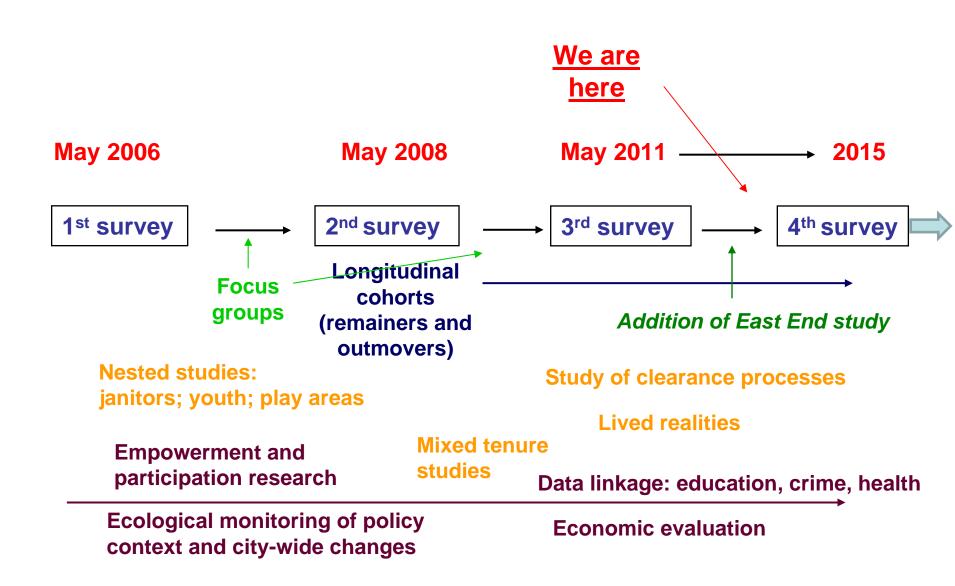
To Conclude...

 There is a strong case for holistic regeneration if public policy is to have positive impacts upon health and wellbeing.

• GoWell is demonstrating this and will continue to do so.

• We will also communicate *why* & *how* this is the case to policy-makers, practitioners and communities.

Timescale





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