Health and its wider determinants: change over time in GoWell Intervention Area Types (IATs)

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GoWell Annual Event

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Housing & Regeneration in Glasgow

- Council housing stock transfer in 2003.
- 8 Transformational Regeneration Areas and 7 Local Regeneration Areas declared in 2005. Masterplans produced in 2006; some later revised.
- Demolition of 19,000 housing units planned across the city.
- Improvement of 49,000 housing units.
- Regeneration overseen by Transforming Communities:Glasgow since 2012.
- Community empowerment within and beyond regeneration process.
- Wider role of RSLs has expanded with government support, including personal support services to tenants.
- City Housing Plans have emphasised: mixed tenure communities; new-build housing to retain working-age families; high environmentally sustainable standards; growth of intermediate tenures.

The Wider Context

- Politics: Devolution in 1999 with devolved powers over key services.
  - Emphasis on community engagement and empowerment: Community Planning Partnerships introduced in 2004 to co-ordinate public services.
  - Change in political control to SNP at national level in 2007: greater emphasis on social policies and the justice agenda.
- Demography: A doubling of the city's ethnic minority population since 2001, to 15% in 2011. Concentrations of asylum seekers in some areas and of economic migrants in others.
- Economy: global crisis in 2008 and austerity since 2010:
  - Increase in city's unemployment by 50% from 2008 to 2012, falling thereafter.
  - Cuts to welfare benefits affecting many residents.
  - Reduction in Glasgow City Council revenue by -11% from2010 to 2017.
  - Poorest neighbourhoods badly affected by cuts in services.

# GoWell Study Areas and Intervention Area Types (IATs)
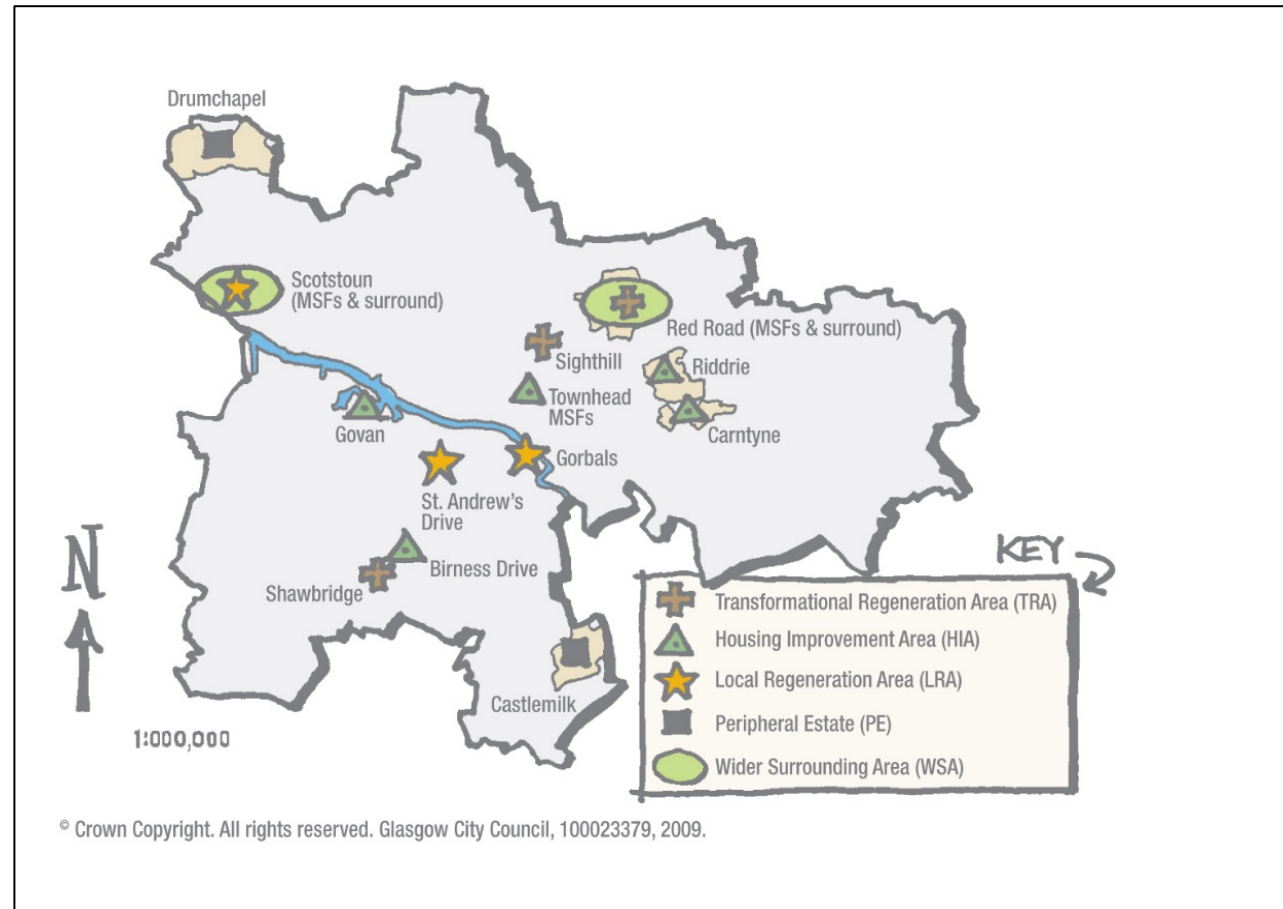
Context: Population Change

Population sizes across GoWell area types over time
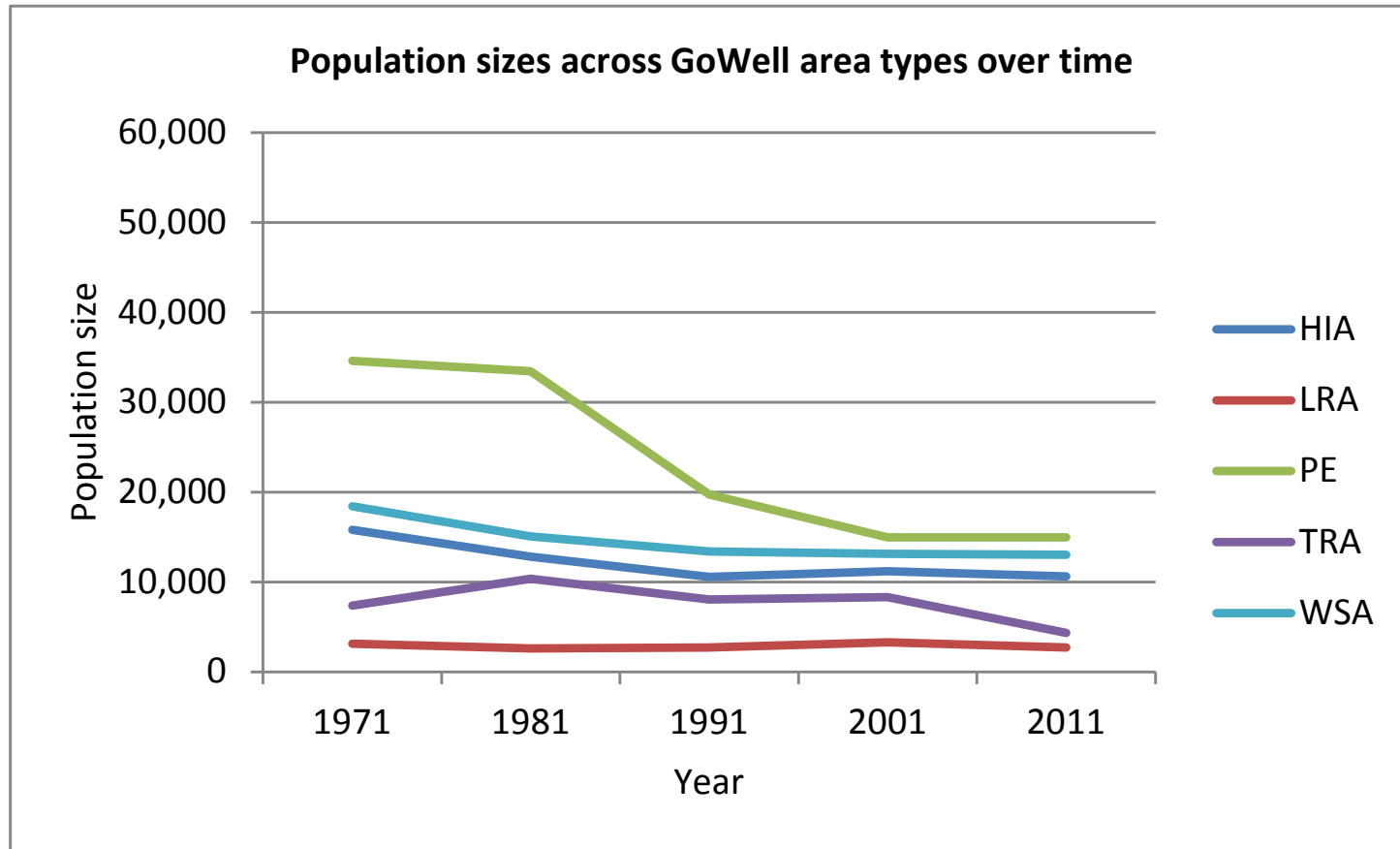
Population counts excluded those living in 'communal establishments' prior to 2011.

The Survey and Analysis

- Cross sectional samples of 5,956 in 2006 (W1) and 3,471 in 2015 (W4).
- Pre-selection of variables within each of five domains.
- Dichotomous or binary categories constructed from the responses.
- Comparison of the % of participants who gave the outcome of interest at Wave 4 compared with Wave 1.
- Analysis by Intervention Area Type (IAT), i.e. groups of study areas.
- Test for statistical significance of change over time for each IAT.
- Test for widening or narrowing of differences ('inequality') between IATs over time.
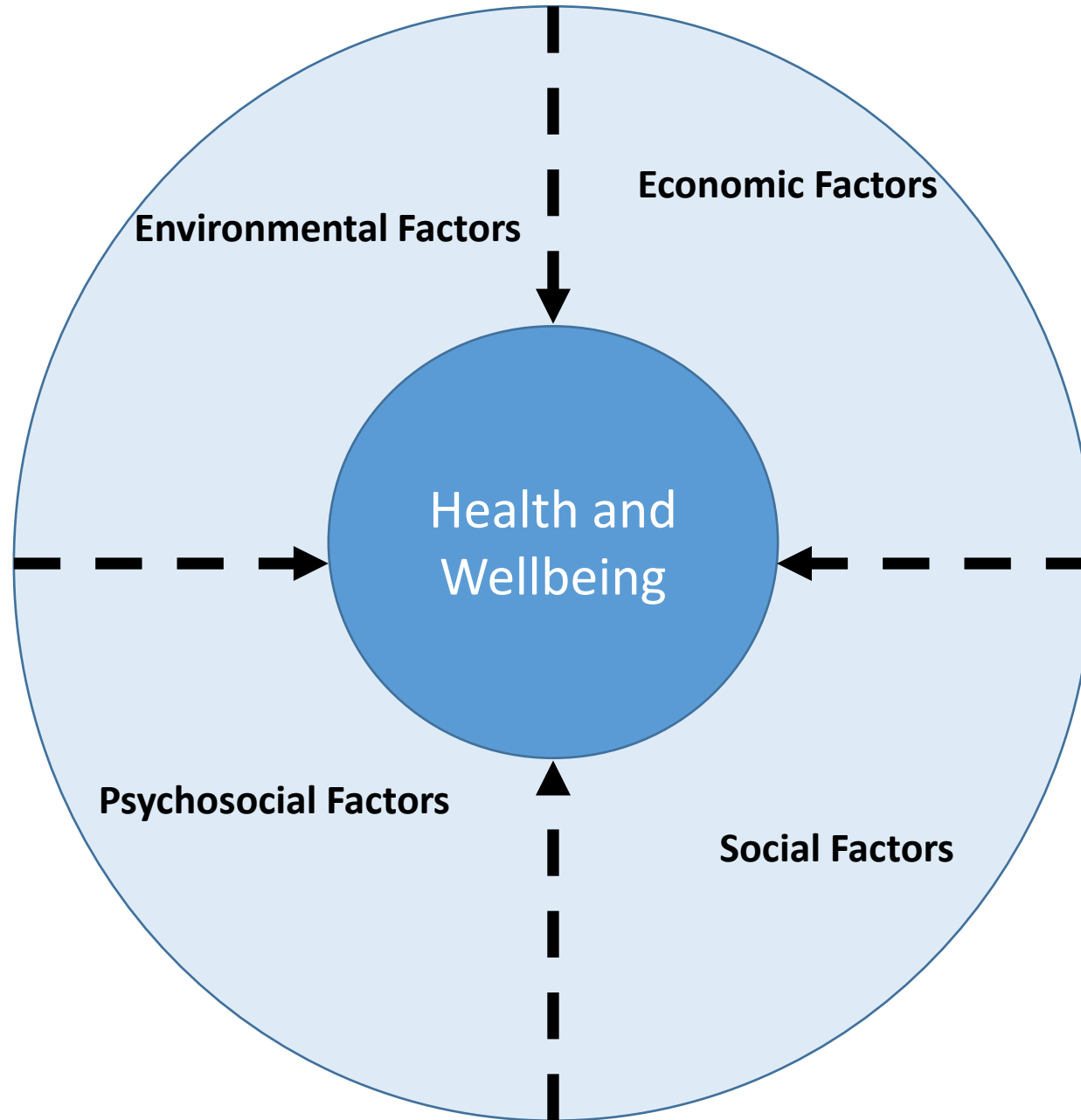
Environmental Factors

Factors Examined

- Housing:
  - Satisfaction: dwelling & services.
  - Condition.
  - Safety.

- Neighbourhood:
  - Satisfaction and trajectory.
  - Environment.
  - Services & Amenities.
 - Anti-social behaviour.

Findings: Change in Variables over Time

- Positive change in all housing variables in almost all areas.

- Positive change in neighbourhood satisfaction, trajectory and environment in almost all areas.

- Positive change in local amenities and services, except youth/leisure.

- Some ASB problems reduced everywhere (vandalism; teenagers) but others showed a mixed picture (drugs; drunkenness).

Findings: Inequality over Time

- The most consistent improvements across the environmental variables were seen in the Regeneration Areas (TRAs; LRAs).

- Least consistent improvement was in the Wider Surrounding Areas.

- Differences between the IATs were reduced for:
  - 3 out of 5 housing variables.
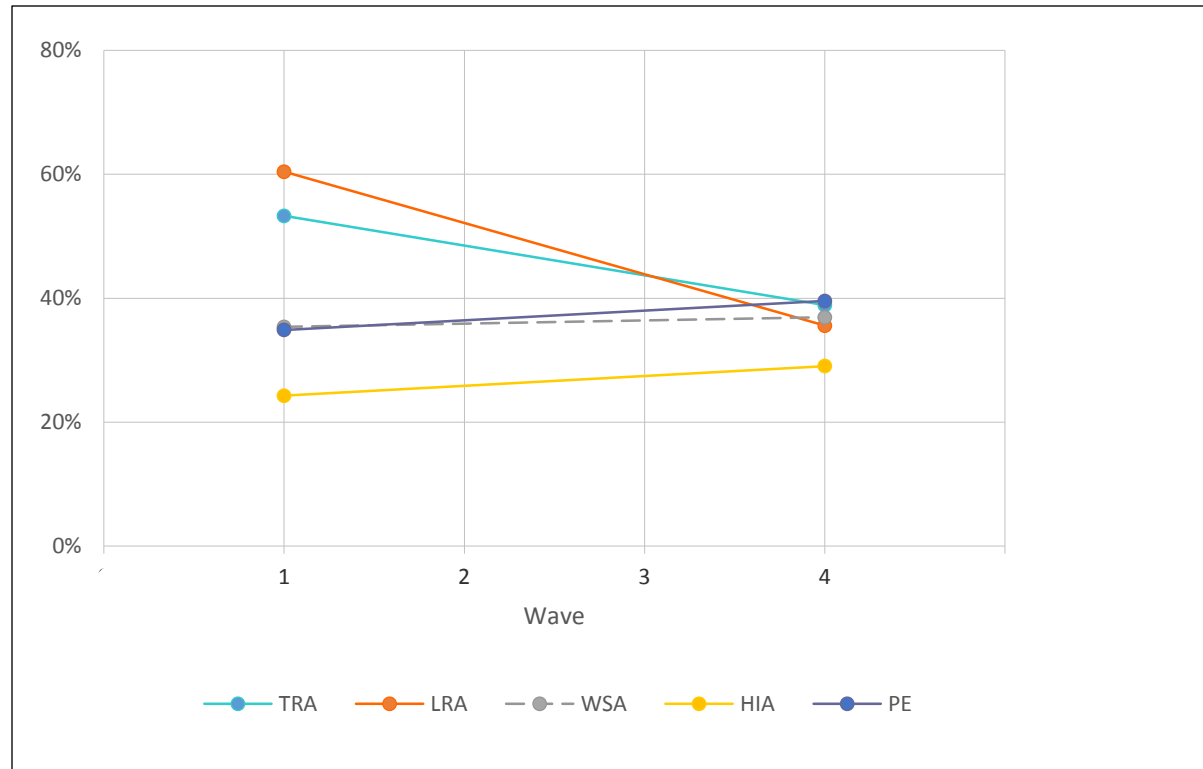 - 1 out of 6 neighbourhood variables.
  - 4 out of 4 ASB variables.

Neighbourhood Environment: 'very attractive'
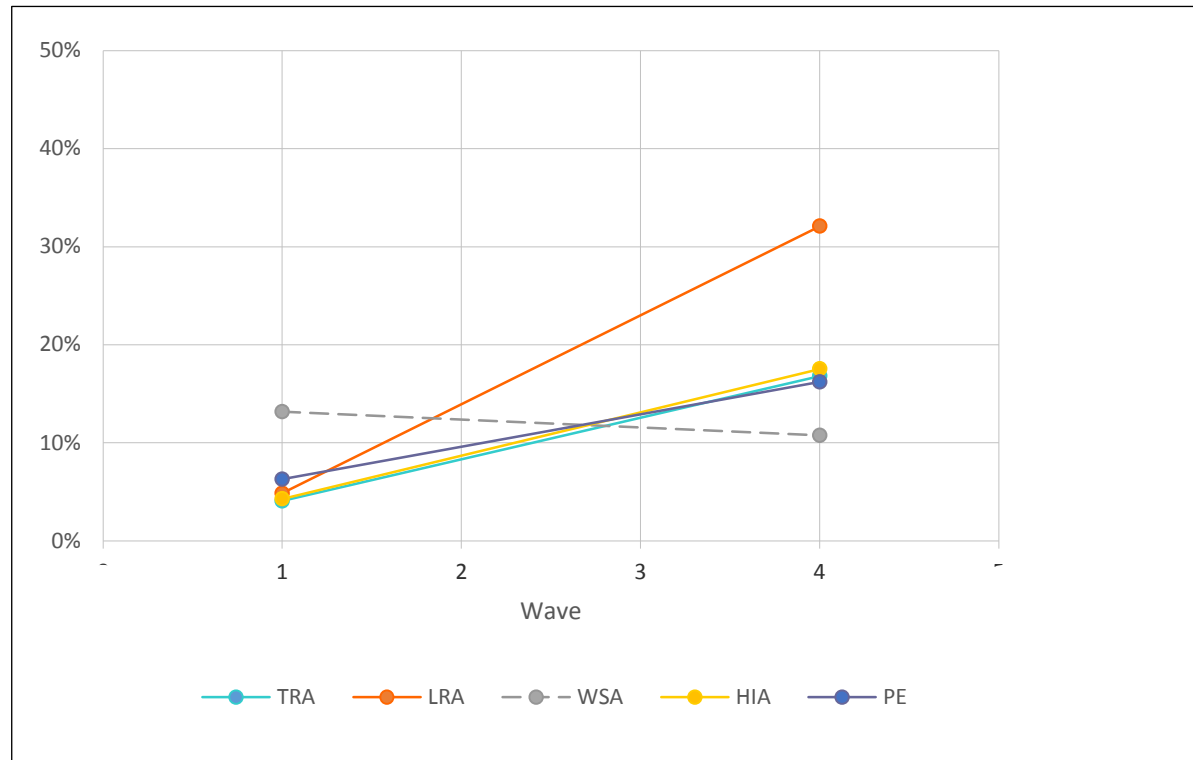
Widening Inequality

Attractiveness of neighbourhood environment rated as 'very good'

Drug dealing or using as a local problem

Narrowing Inequality

People using or dealing drugs identified as a 'slight problem' or 'serious problem' in the local neighbourhood.

# Social Factors

Factors Examined

- Sense of community & cohesion
  - Belonging.
  - Informal control.
  - Neighbours' honesty.

- Social contact and support:
  - Speaking to neighbours.
  - Meeting friends.
  - Advice and support in a crisis.

Findings: Belonging, Social Contact & Support

- Positive change over time was sparse.
  - Only in the TRAs did most social variables exhibit positive change over time.
  - In the other IATs more variables got worse over time than got better.
- Values on the belonging, social contact and social support variables were reasonably high in 2015, with typically 70-80% of participants giving positive answers.
  - The social support variable improved in most IATs.
  - Inequalities between IATs on these variables narrowed over time.

Available Emotional Support
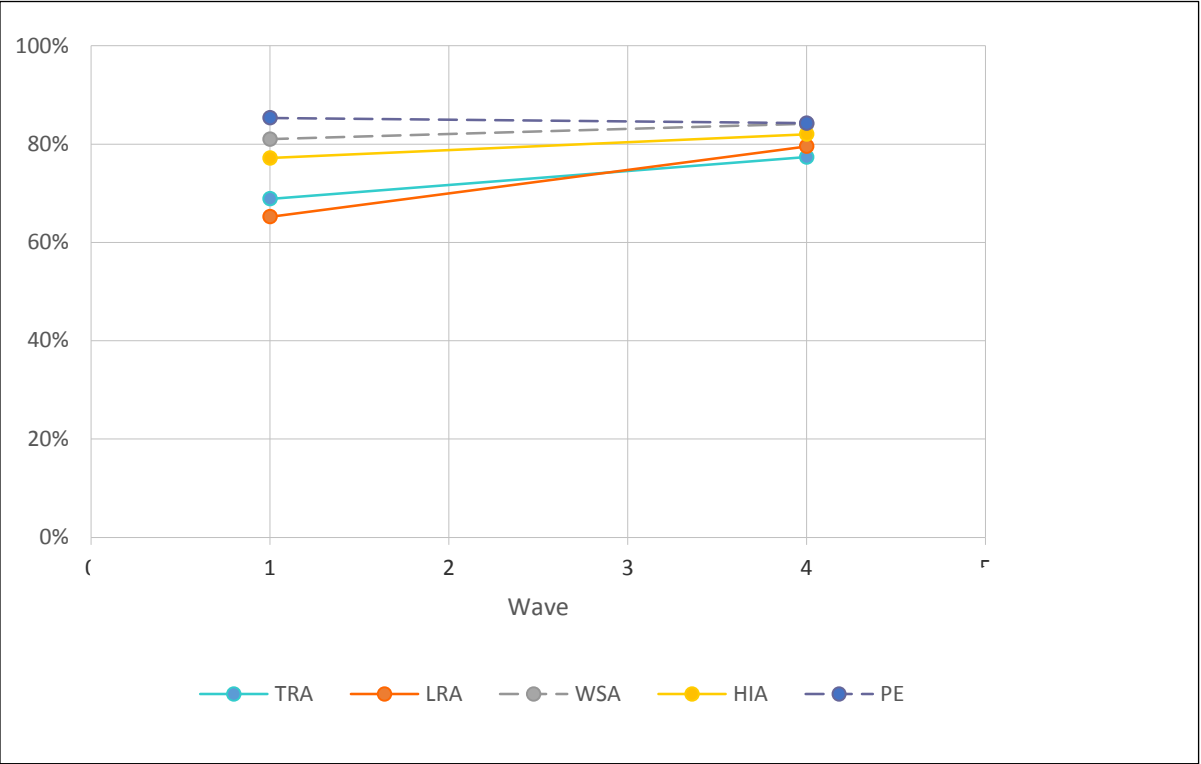
Narrowing Inequality

Respondent has one or more persons to ask for advice or support in a crisis

Findings: Cohesion

- Values on the cohesion variables, about relying on (possibly unknown) others, were lower than for social contact variables in 2015:
  - Expectations of informal social control improved in one IAT over time.
  - Perceived honesty improved over time in two IATs.
  - Inequality between IATs stayed the same over time for informal control and widened over time for neighbours' honesty.

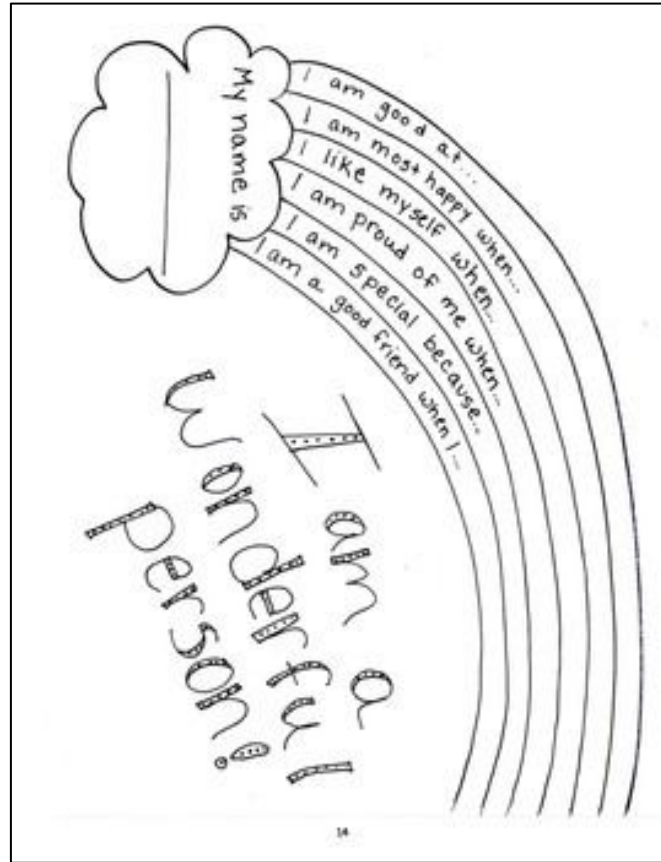# Perceived Neighbours' Honesty
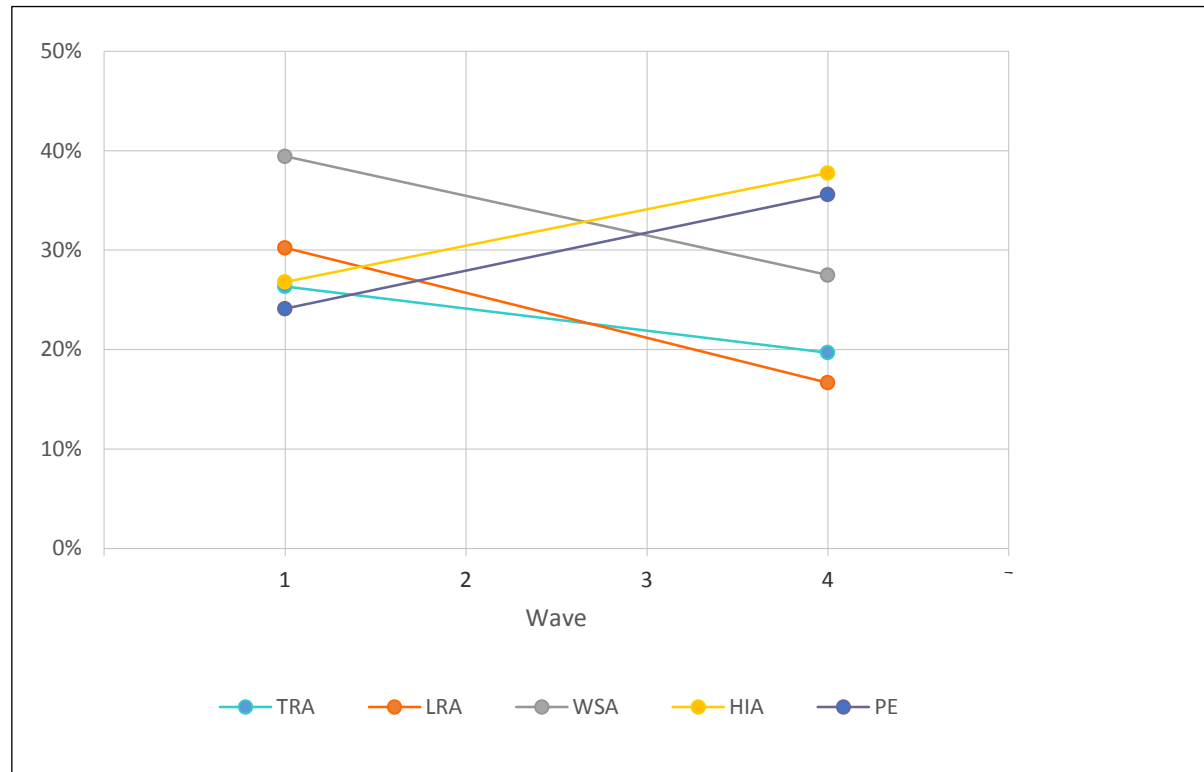
Widening Inequality

Agree that someone would have a wallet or purse returned without anything missing

Psychosocial Factors

Factors Examined

- Status:
  - Sense of progress from home.
  - Desirability of one's home.
  - Sense of progress from neighbourhood.
  - Internal area reputation.
  - External area reputation.

- Empowerment:
  (1) Housing:
  - Kept informed by landlord/factor.
  - Views taken into account by landlord/factor.

  (2) Neighbourhood:
  - Can influence decisions affecting local area.
  - Can find ways to improve things.
  - Service providers responsive to residents' views.

Findings: Status Variables

- Three status variables improved in all five IATs: the two sense of progress variables, plus internal area reputation.

- Perceived desirability of the home improved in the two regeneration areas and in the peripheral estates.

- The perceived external reputation of the area worsened in three IATs and remained unchanged in the other two.

Negative External Area Reputation
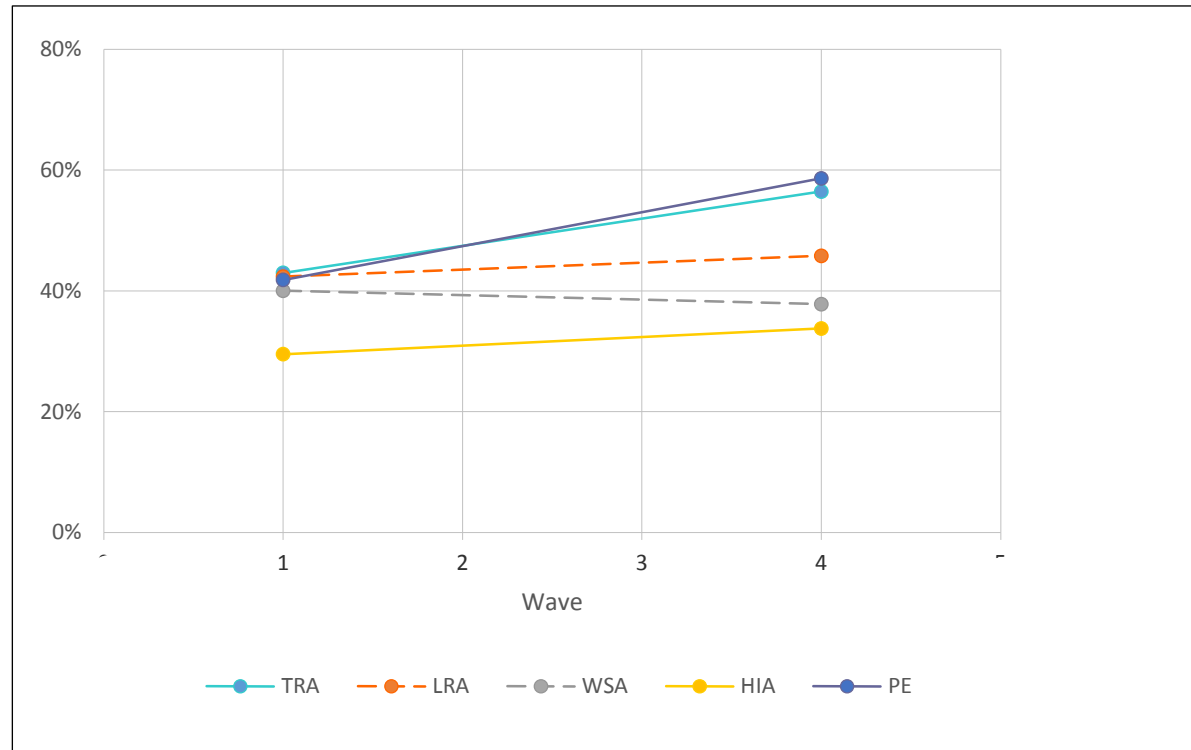
Widening Inequality

Agree that 'Many people in Glasgow think this neighbourhood has a bad reputation'.

Findings: Empowerment Variables

- All five empowerment variables improved over time in four of the five IATs; the exception was the WSAs where only two variables improved.

- Inequalities between the IATs narrowed on all five variables.

- For both the status and empowerment variables, the housing factors were rated higher than the neighbourhood factors.

- Of the three neighbourhood empowerment variables, the most widespread positive views at Wave 4 were in respect of pro-activity, followed by service responsiveness, and then influencing decisions.

Responsiveness of Local Services
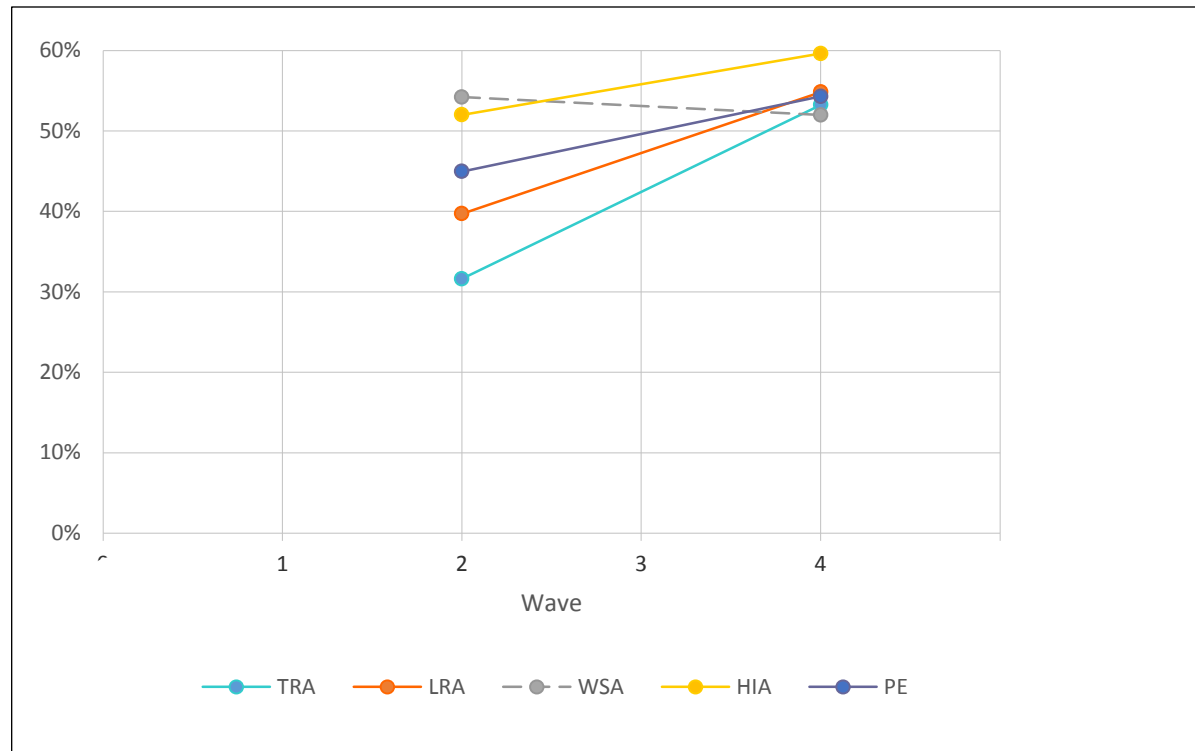
Narrowing Inequality

Agree that 'The providers of local services respond to the views of local people'.

Economic Factors
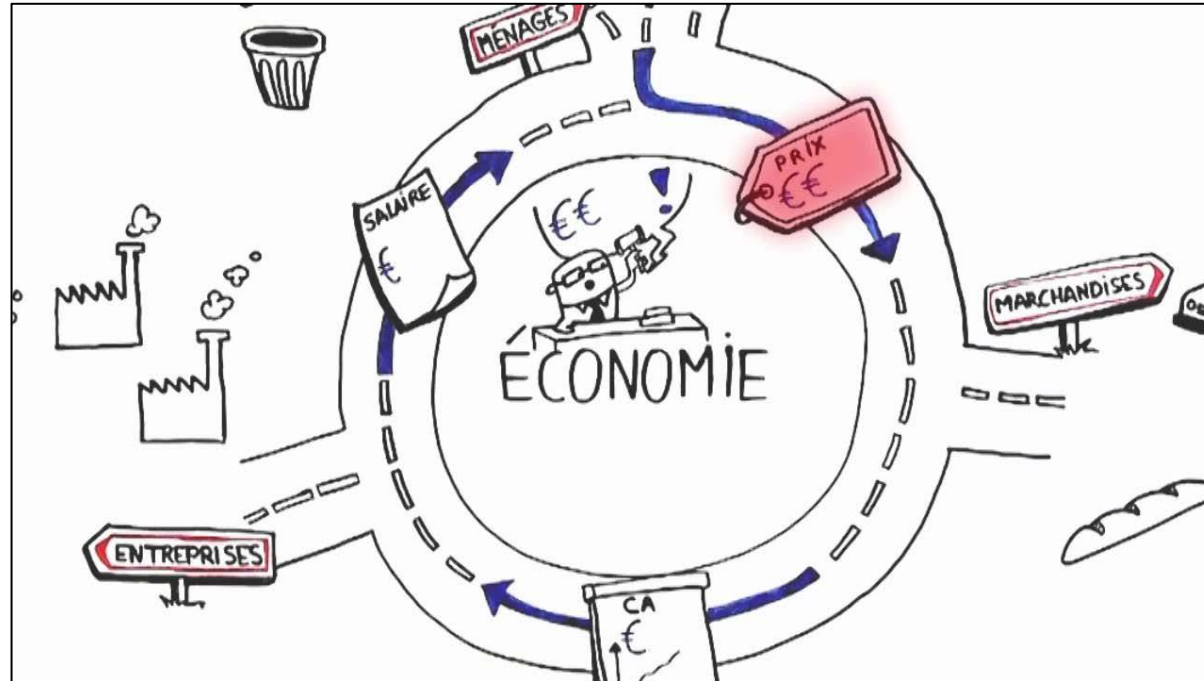
Factors Examined

- Employment:
  - Female employment rate.
  - Male employment rate.
  - Workless households.

(Working age: full or part-time work or full time education)

- Disability:
  - Female long-term sickness or disability.
  - Male long-term sickness or disability.

(Working age)

- Affordability (difficulty paying for):
  - Fuel bills
  - Food.
  - Rent or mortgage.

(All households)

Findings: Employment Factors

- All three employment factors improved in the TRAs and WSAs, with sparse improvement elsewhere.
  - These increases in employment appear to be greater than for the city.
- Inequality between the IATs narrowed for female employment and for workless households.
- At Wave 4, typically 40% of working age women and 40-55% of working age men in each IAT were in work or education.
- The adult employment rate for Glasgow increased by 5% from 2010 to reach its highest level for a decade of 66.5% in 2015. One IAT came close to this.
- The proportion of workless households fell substantially in both types of regeneration area, but increased in the peripheral estates.

Workless Households
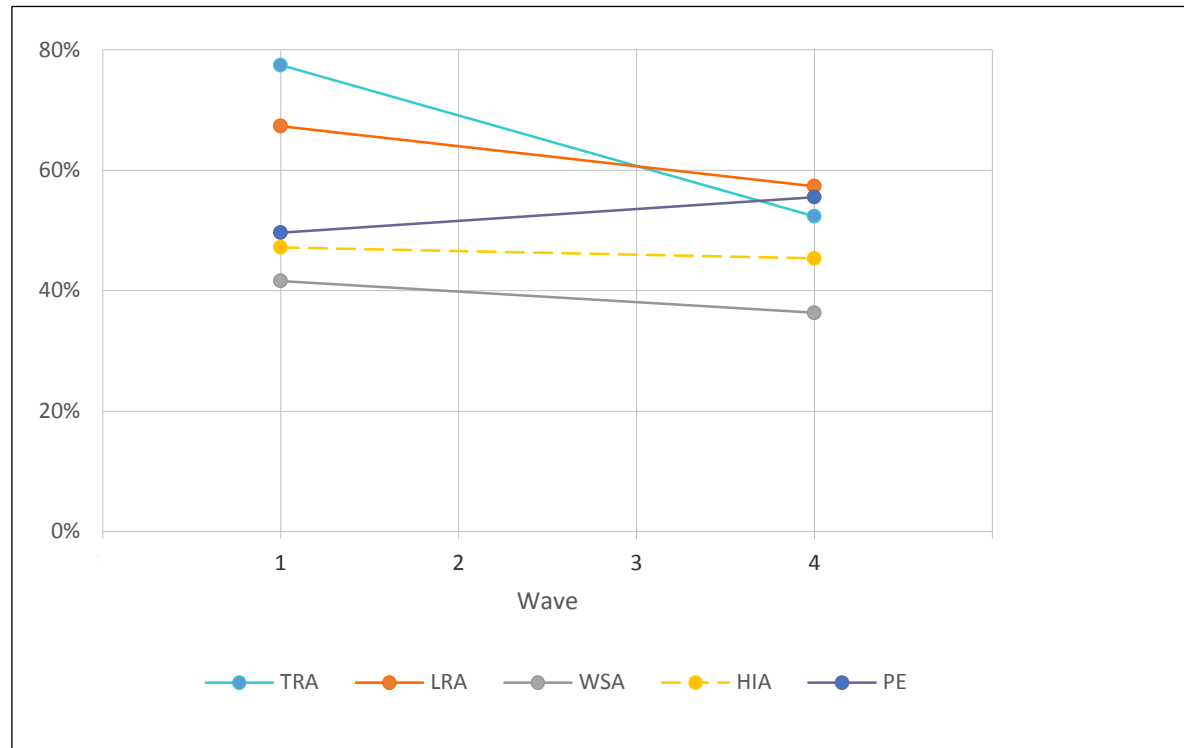
Narrowing Inequality

Households containing at least one adult aged under 65, but without any adult being in full- or part-time employment.

Findings: Affordability Difficulties

- All three items (fuel, food, housing) became more affordable in the two regeneration area types (TRAs and LRAs).

- Owner occupier costs became more affordable everywhere.

- Social renting also became more affordable in the HIAs.

- Difficulties paying for fuel and food increased (from a lower baseline) in the HIAs and PEs.

Difficulty paying fuel bills
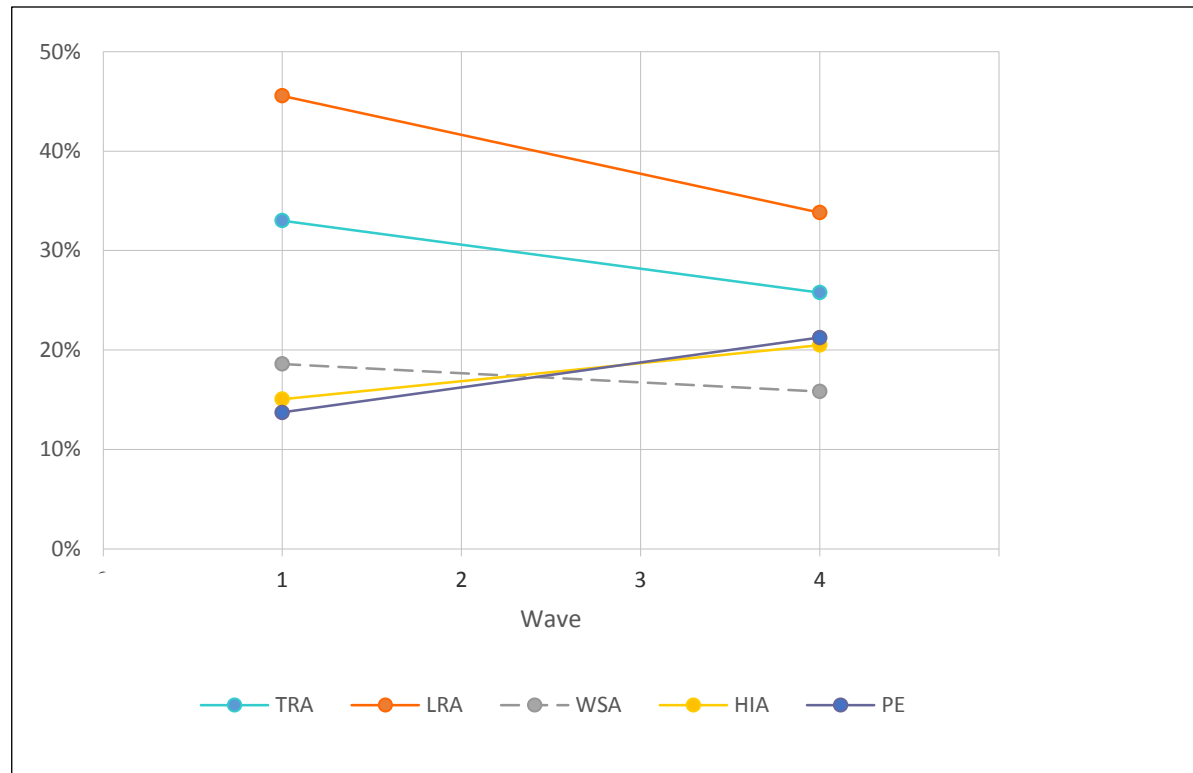
Narrowing Inequality

Occasionally, quite often or very often have difficulty paying for fuel bills.

Health and Wellbeing

Factors Examined

- General Health:
  - Self-assessed health status.
  - 1 or more long-term health conditions (out of five).

- Mental Health and Wellbeing:
  - Long-term stress, anxiety or depression.
  - Optimism.
  - Confidence.
  - Clear thinking.

- Health Behaviours:
  - Current smoker.
  - Intention to quite smoking.
  - Drink alcohol.
  - Fast-food for main meals.
  - Neighbourhood walking.

Findings: General Health

- Self-assessed health ('good' or better) declined by ten points or so in all the IATs.
  - The drop was larger and more widespread among those aged 40 or more.
  - In the peripheral estates, however, the drop was only evident for those 25-39.

- The prevalence of long-term health conditions increased over time in the LRAs, and remained unchanged elsewhere.

Findings: Mental Health and Wellbeing

- The prevalence of long-term stress anxiety and depression increased by a similar amount in all IATs, from Wave 2 to Wave 4.
  - In 2015, between 17% and 25% suffered this problem in each IAT.
  - This is reflective of the national situation where symptoms of depression and anxiety have been rising in adults since 2008.
- We found a number of changes over time in mental wellbeing (more positive than negative), while the national situation was unchanged over the period 2008 to 2015:
  - All three mental wellbeing indicators improved over time in the TRAs.
  - The number of participants reporting thinking clearly increased over time in three of the IATs: TRAs, LRAs and WSAs.
  - Two out of three mental wellbeing indicators worsened in the HIAs.

Confidence
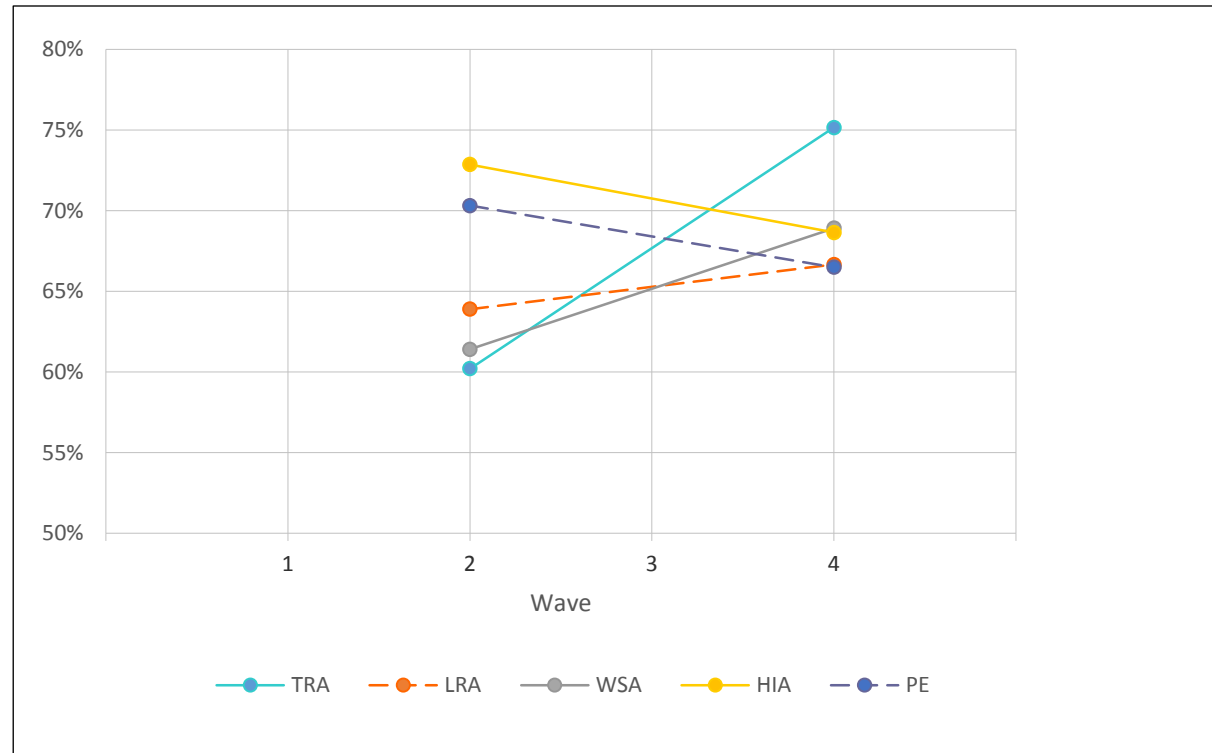
Narrowing Inequality

Felt confident 'all of the time' or 'often' over the last two weeks.

Findings: Smoking

- There were reductions in rates of smoking among participants in the three non-regeneration area types.
    - The reduction (-6%) was similar to the national rate of reduction.
    - Smoking rates remained much higher (a third or more) in all the IATs than the national rate in 2015 (21%), especially in the peripheral estates (47%).
- Intention to quit smoking increased in four of the IATs over time.
    - The rate of intention to quit recorded in our study in 2015 (43%-62% in each IAT) was lower than the rate at which smokers nationally say they 'would like to quit' (two-thirds).

Findings: Drinking and Fast Food Meals

- There were substantial increases from Wave 1 to Wave 4 in the number of participants who said that they drink alcohol, in all five IATs.
  - The increase runs counter to the national trend of reduction in drinking since 2003.
  - However, the rate of drinking alcohol in our IATs (48% - 62%) is much lower than the national rate of 84% of adults usually consuming alcohol each week.
- The number of participants who reported getting their main meal of the day from a fast food outlet on one or more days in the past week increased significantly in two of the IATs: the PEs and the WSAs.
  - Around half the participants did this in all the IATs in 2015 (55% in PEs).

Findings: Walking

- Regular neighbourhood walking (5 or more days per week) increased from Wave 2 to Wave 4 in four out of five IATs.

- Between 38% (WSAs) and 51% (TRAs) of participants undertook regular neighbourhood walking in 2015.

- Inequality on this indicator widened between the IATs due to the rate of walking not improving in the WSAs.

Neighbourhood Walking
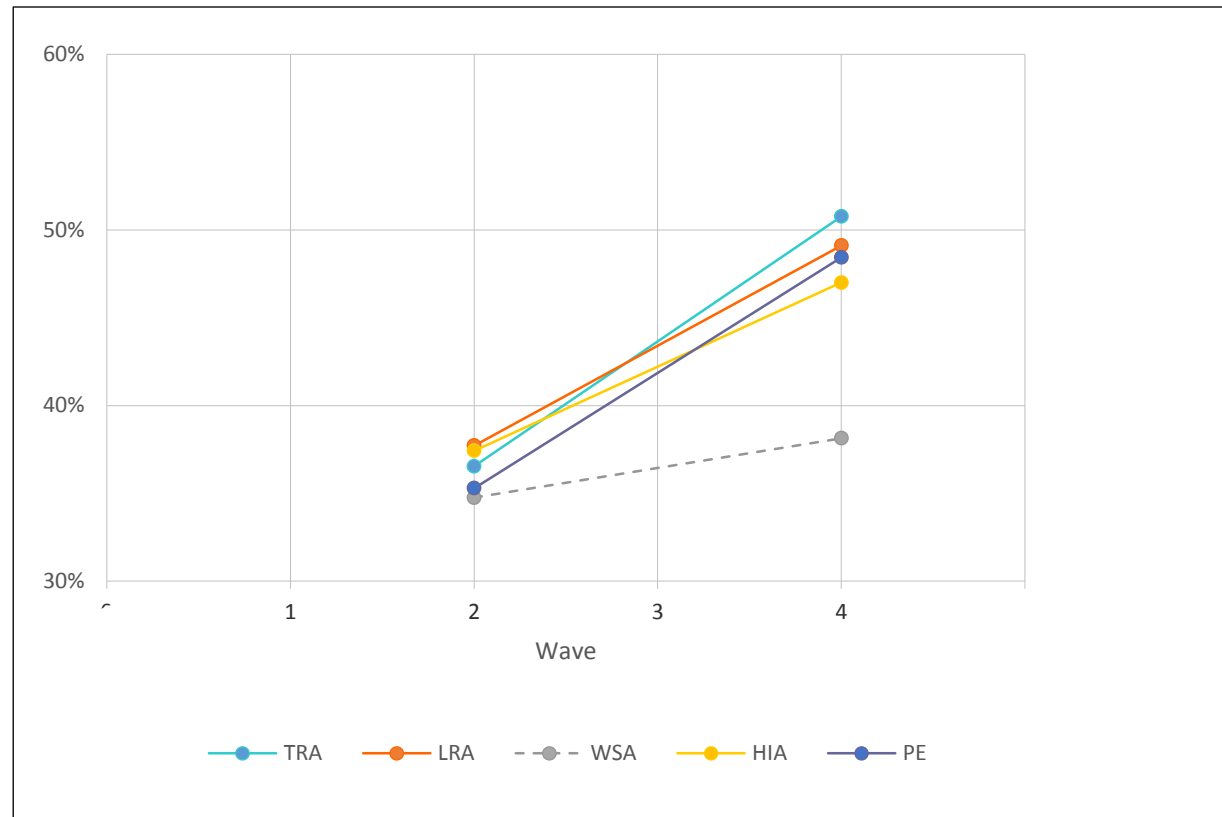
Widening Inequality

Walk in the local neighbourhood for at least 20 minutes at a time on 5 or more days in the past week.

Summary

- Environmental Factors:
  - Broad improvements over time across most indicators.
  - More consistent for housing indicators than neighbourhood indicators.
  - For neighbourhood indicators, physical factors improved more than social problems or (some) amenities.
  - Improvements were most comprehensive in the regeneration areas.
  - Majority of people in regeneration areas identified a positive neighbourhood trajectory by 2015.
- Social Factors:
  - Positive changes were less common across the IATs on social indicators.
  - Most consistent improvements were seen in the TRAs.
  - No improvements seen in the WSAs.
  - Highest levels of trust and social contact were seen in the PEs.

- Psychosocial Factors:
    - Widespread improvements over time on most indicators of status and on all indicators of empowerment.
    - Similar pattern in regeneration areas and non-regeneration areas.
    - Except - fewest improvements seen in the WSAs.
    - No improvements seen in perceived external area reputation in any IAT.
- Economic Factors:
    - Improvements in employment indicators seen in the regeneration areas (esp. TRAs) and WSAs – could be influenced by population changes.
    - Housing became more affordable in many areas.
    - Food and fuel became more affordable in regeneration areas but less affordable in other areas.
    - Peripheral estates experienced increases in both worklessness and problems paying for fuel and food.

- Health Indicators:
  - Showed the least improvement over time of all the factors.
  - Self-reported health and mental health problems worsened in all areas.
  - Mental wellbeing indicators improved in the TRAs but the results on these indictors were mixed or absent elsewhere.
  - Widespread improvements in frequency of walking in all IATs.
  - Improvements in smoking in most IATs.
  - Increases in drinking alcohol in all IATs.
  - TRAs had best result at Wave 4 on three health indicators and LRAs on two.
  - PEs had worst result at Wave 4 on five health indicators.

Regeneration areas: positive changes

Environment

Economic factors

Psychosocial factors

Social factors

Housing conditions

ASB: vandalism, drugs, youth, drunkenness

Amenities: shops, parks

Neighbourhood environment

Housing services

Safety at home

Neighbourhood satisfaction

Progress through home

Desirability of home

Progress through neighbourhood

Neighbourhood empowerment

Internal neighbourhood reputation

Housing empowerment

Affordability of food, fuel and housing

Male and female employment

Workless neighbourhoods

Social support

Sense of community

Mental wellbeing

Intention to quit smoking

Neighbourhood walking

Regeneration areas: negative changes

Non-regeneration areas: positive changes

Environment
Economic factors
Psychosocial factors
Social factors

Housing conditions
Housing services
Amenities: shops, parks
ASB: vandalism, youths
Neighbourhood environment
Feelings of home safety
Neighbourhood satisfaction

Long term sickness: men
Female employment
Affordability of housing

Smoking rate
Intention to quit smoking
Neighbourhood walking

Progress through home
Desirability of home
Progress through neighbourhood
Neighbourhood empowerment
Internal neighbourhood reputation
Housing empowerment

Social support
Trust in neighbours honesty

Non-regeneration areas: negative changes

Environment

Economic factors

Social factors

Psychosocial factors

Workless households

Affordability of fuel

Affordability of food

ASB: Drug problems

Stress, anxiety and depression

Self-assessed health

Mental wellbeing

Drinking alcohol

Fast food meals

Contact with friends

External neighbourhood reputation

Sense of community

Contact with neighbours

Conclusion

- Some improvements in regeneration areas (e.g. environmental and psychosocial factors) are likely to be a product of the extent, visibility and processes of change that are underway. These gains are not exclusive to regeneration areas, but are often greater there.

- Other positive changes in regeneration areas (e.g. social factors and affordability indicators) may be a product of the provision of new housing built there. We need to see if these changes endure.

- Some positive changes (e.g. employment indicators) in regeneration areas and their surroundings, are potentially a result of the population changes brought about by regeneration, plus changes in status over time for migrants in these areas.

- The poorer performance of the Wider Surrounding Areas on cohesion, social contact and empowerment indicators suggests that regeneration may be having some 'negative spillover' effects in these areas. Adjacent areas may need more support in future regeneration.
- The fact that non-regeneration areas see less improvement and some decline in social and economic factors, and in drug problems, is a reminder of the need for continued investment and support in more stable, but nonetheless very deprived communities.
- General health, stress etc., and drinking behaviours have worsened in all the deprived communities studied. Regeneration seems to have had little impact on these aspects of health.
- Regeneration is associated with improvements in mental wellbeing and in walking behaviours, although the second of these changes is not exclusive to these areas.

- The results suggest that regeneration strategies might still have to fill two gaps in their portfolio of activities:
  - Public relations & image management: to bring about enhancements in an area's image and reputation alongside physical and social changes.
  - The incorporation of a public health programme, e.g. to take advantage of an increase in intention to quit smoking; or to prevent an increase in drinking.
- These results are aggregate associations of indicators over time.
  - The comparison between regeneration and non-regeneration areas gives us an indication of the counterfactual, but cannot give the complete picture.
  - Our next task is to examine which health and wellbeing outcomes change for whom, and by which mechanisms (physical, social, psychosocial, economic).
- The regeneration process is unfinished. Further changes in environments and populations will take place in many of our study areas over the next ten years as regeneration proceeds. There is a need to continue studying the social and health impacts.