Regional Social Strategy
2nd Edition 2007

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- Education
- Child poverty
- Parenting
- Health

**SO4: To improve the life chances of adults through learning and skills development**
- Skills for Life
- The East of England Skills and Competitiveness Partnership

**SO5: To promote active ageing and reduce social exclusion of older people**
- Housing and health
- Income
- Communities

**SO6: To support the development of sustainable communities**
- Housing
- Neighbourhoods and the environment
- Cultural opportunities
- Crime
- Health

**SO7: To improve access to services, especially for disadvantaged groups**
- Financial services
- Information and advice services
- Transport services

**SO8: To develop social networks, community assets and promote community cohesion**
- Social networks
- Community assets
- Community cohesion

### Action plan

### Glossary
Foreword

I am pleased to introduce this second edition of the Regional Social Strategy, which builds on the vision of its predecessor ‘to achieve social inclusion throughout the East of England’.

This vision, shared by the Assembly and its partners, recognises that achieving a fair and inclusive society is essential to ensuring the balance of economic, social and environmental interests in the region. A socially inclusive society is more likely to prosper, thrive and develop sustainably, than one where exclusion and inequalities in life chances are left unchecked.

I am immensely grateful to all those who contributed to the strategic review which produced this document and its accompanying action plan. The review was led by members of the Assembly’s Social Inclusion Panel, in partnership with a multi-agency project group, with expertise from the statutory, community, voluntary and private sectors. Indeed, the diversity of contributors is reflected in the range of activities outlined in the action plan, which aims to extend the success of the first Regional Social Strategy to a sub-regional and local level.

Those first successes have been significant and are addressed in more detail below. The Social Inclusion Panel will continue to keep the strategy under review, to ensure that further progress is made against its objectives and that its activities continue to respect diversity and promote equality; principles which are fundamental to social inclusion.

The regional landscape within which we must realise our vision is constantly changing and there are many challenges ahead. I have confidence, however, in the enthusiasm, dedication and ability of those who have contributed to this strategy, and look forward to our continued working together to achieve its objectives.

Keith Bennett
Chair, Social Inclusion Panel
East of England Regional Assembly

October 2007
Achievements of the strategy to date

Since this strategy was first published in 2004, stakeholders in social inclusion around the region have reported significant improvements in inter-agency networking and co-operation, with organisations initially brought together to develop the strategy now working together on its implementation.

In particular, the following are some of the strategy’s achievements over the last three years.

A successful bid to the Financial Inclusion Fund

As part of the £45 million Financial Inclusion Fund announced in the 2004 Pre-Budget Report, a sum was allocated to increase the provision of free face-to-face debt advice in England and Wales over the period 2006-2008.

Advice UK and Citizens Advice – East Region jointly submitted a bid, drawing heavily on evidence contained within the Regional Social Strategy and successfully securing two separate contracts for the East of England. Citizens Advice was allocated just under £1 million for the recruitment and employment of 10.5 full-time equivalent (fte) debt advisors and Advice UK was allocated just over £0.5 million for recruitment and employment of 6 fte debt advisors. This equated to 3 fte advisors for Norfolk, 4 for Suffolk, 2.5 for Essex, 3 for Bedfordshire and 3 for Cambridgeshire.

The funding has been used to recruit individuals with no previous advice experience and to provide them with comprehensive, fully-funded and nationally-recognised training, thereby leading to a net increase in trained advisors in the region rather than displacement of advisors from other funding streams.

Demand for debt advice remains high in the region with typical waiting times of three-five weeks. Together, however, these two advice projects anticipate being able to provide advice to over 4,000 clients over a two-year period.

Development of a regional centre of excellence for sustainable communities

The Regional Social Strategy was one of the key drivers for the development of Inspire East, the region’s centre of excellence for sustainable communities. Established in 2005, Inspire East champions the creation of high quality places to live, work and visit.

It does this by promoting better community and physical development in regeneration areas and areas of growth; enhancing skills in sustainable development by sharing knowledge, information and experience, and working closely with training providers; improving the quality of projects through benchmarking and sharing best practice; and, influencing and guiding policy for sustainable communities.

Over the last 12 months Inspire East’s achievements include successfully delivering over 2,000 learning opportunities, signing an accord with the Construction Industry Council to deliver cross-disciplinary learning, supporting a range of professional networks and two regional award schemes and setting up the first regional enabling service. The enabling service consists of a panel of experts in sustainable communities who provide independent advice and support to projects around the region.
Publication of a Regional Health Strategy

The East of England is set to experience a period of rapid and substantial growth during the next twenty years, which will require a healthy, skilled and economically active population if it is to be sustainable. Although people living in the East of England enjoy relatively good health when compared with the rest of the country, the Regional Social Strategy highlights pockets of rural and urban deprivation that have costly implications for the economy and society – in terms of ill health, fragmented communities, wasted potential, lost income and pressure on services.

One of the Regional Social Strategy's original actions to support sustainable communities was the development of Healthy Futures, the Regional Health Strategy. Published in 2005, Healthy Futures provides a regional framework of priorities, policies and actions that can support local activity to improve health and reduce health inequalities for people living and working in the East of England.

Access to good quality health services is important to protect and improve the health of the region's population. However, some of the most important determinants of health such as education, employment, income and housing lie outside the direct influence of health and social care services.

The Regional Health Strategy, therefore, is less about what the National Health Service (NHS) is doing to promote health and treat illness in the region, and more about what can be achieved when the NHS works in partnership to address the key determinants of health and health inequalities. It is designed to enable policy makers, practitioners and partnerships alike to tackle the determinants of ill health and health inequalities to effect long-term change.

Development of a Single Information Portal for migrant workers

In 2005 The East of England Development Agency (EEDA) published Migrant Workers in the East of England, a piece of research supported by the Regional Social Strategy. Building on this survey of migrant worker employment in the region, EEDA have recently developed an innovative package of support and advice for migrant workers. The £200,000, 18-month pilot Single Information Portal project will help workers from countries such as Portugal and Poland to settle into the East of England community quickly and actively contribute to the region's economy.

The first element of the project to be launched was the Mobile Europeans Taking Action (META) Hotline, a telephone service providing information, support and guidance to empower migrant workers and make a real difference to their lives in the UK. The META Hotline is being delivered by Keystone Development Trust in partnership with Advice for Life, the organisation leading on the wider information portal project. Callers to the hotline are connected to advisors who speak Czech, Lithuanian, Polish, Portuguese, Russian or English. Advisors are trained to provide information about rights to live and work in the UK, accommodation, public services, driving, language training and adult education providers and welfare benefits.

Since its launch, the majority of calls to the hotline have come from the Portuguese, Polish and Lithuanian communities and from the counties of Norfolk, Suffolk and Cambridgeshire. Further efforts are being made to encourage callers from across the region and negotiations with other regions are in progress to expand the service to other parts of the country.
Achievements of the strategy to date

In July an advice line for employers and other people working with migrants was also launched. This offers free professional advice on employment and other matters affecting migrants, and the law and procedures employers need to follow. Both these services will be supported by a website to be launched in the autumn of 2007.

The Investing in Communities programme

EEDA’s Investing in Communities (IiC) programme is an example of a long-term regeneration programme which seeks to achieve effective co-ordination of funding and interventions. Its key aim is to encourage a holistic partnership approach to tackling disadvantage, encouraging the alignment of all available public sector resources to deliver agreed strategic priorities.

Set up in 2004, IiC has helped to deliver the goals of the Regional Social Strategy at two levels – one delivering programmes of work across the region, the other providing funding through nine sub-regional partnerships.

As well as taking a national lead on migrant worker issues, as described above, encouraging new business and social enterprise is another priority for IiC. In 2005 iIC funded Social Enterprise East of England to develop a regional strategy for social enterprise, and is now funding it to act as the co-ordinator for social enterprises across the region. Between 2005 and 2007 IiC has been promoting women’s enterprise, developing the East of England’s first ever women’s enterprise strategy, creating the first business support directory for women in the East of England and investing £1.2 million with co-funding from the European Social Fund in the region-wide Enterprising Women initiative.

IiC has also funded a range of Community Development Finance Institutions (CDFIs) that offer small-scale loans to start-up and growing businesses that are viable but pose too great a risk to secure a bank loan. IiC has recently commissioned research into the most sustainable model of providing such funding and as a result is preparing to tender for a contract with a single CDFI for a £1 million loan portfolio across the region.

One of the most recent projects from IiC is the Building Communities Fund, a £3 million-a-year regional programme that will provide support to communities who want to cultivate assets and take an enterprising approach to local regeneration.

At the sub-regional level IiC works with nine partnerships to ensure that funding is tailored to local needs. Each sub-region has its own business plan, and EEDA has committed to investing over £100 million through the partnerships between 2007 and 2011. A principal focus is to help people into employment, with £25 million going into projects such as skills training, business coaching and tackling work-limiting illness.

Engaging young people in the governance of the region

Actions stemming from the Regional Social Strategy have led to the successful involvement of more young people in the development of interventions which support their well-being. Following the positive contribution made by the UK Youth Parliament (UKYP) representative in 2006/7, the UKYP has again been invited to nominate a representative onto the East of England Regional Assembly (EERA) as part of the Community Stakeholder group for 2007/8. As well as participating in meetings of the full Assembly, the UKYP member will sit on EERA’s Europe and International Affairs Panel.
The Social Strategy has also provided the framework for EERA to support the regional youth participation group, YIPPEE, with a number of initiatives to increase its membership and raise its profile. YIPPEE is a growing network of professionals crossing sectors and age groups and has been established to share good practice and to promote the involvement of children and young people in decision making.

EERA is also finalising proposals with the Government Office for the East of England (GO-East) to use advisors to give a young people’s perspective on regional policy and strategy development. These young advisors will provide GO-East and EERA with a ‘youth-proofing’ service to ensure that the views of young people are understood and reflected in the work of both organisations.
Chapter 1 – Vision, aims & objectives

1.1 Introduction

This strategy sets out the vision, objectives and means for achieving a fair and inclusive society in the East of England. In spite of this region’s considerable economic growth and improving levels of prosperity for the majority of its population, many areas and people have been left behind. For example, there are hundreds of thousands of people living in poverty or experiencing economic difficulty – 25% of pensioners, 22% of children and 14% of working age adults are in households with incomes below the poverty threshold (Households Below Average Income, 1994/5-2004/5, Department for Work and Pensions – DWP). Poverty and social exclusion have costly implications for the economy and society – in terms of ill health, fragmented communities, wasted potential, lost income and pressure on services. Society has a duty to ensure a decent standard of living for everyone and to prevent damaging inequalities in health and life chances in general.

Many local people, together with the statutory and voluntary and community sectors, are already working hard to reduce social exclusion in their communities. Local partnerships and community strategies have a key role to play in this. This strategy is about regional priorities, policies and actions that can support local activity and provide a regional framework for tackling social exclusion across the East of England.
1.2 Document structure

This second edition of the Regional Social Strategy is structured as follows:

- Chapter Two provides an overview of social exclusion, its causes and how it is experienced across the region, taking into account relevant developments since this strategy was first published. Where possible, statistical references first provided in 2004 have been updated.
- Chapter Three explores the ways in which we can intervene most effectively and provides exemplar case studies from around the region.
- An accompanying three-year action plan sets out how social exclusion in the East of England can be tackled, based on the preceding analysis.

1.3 Who is this document for?

Everyone who is concerned with addressing social exclusion has an interest in reading this strategy. In particular, it is designed to enable policy makers, practitioners and partnerships alike to tackle social exclusion and effect long-term change. It is especially relevant to those who will determine its successful delivery through local strategic partnerships (LSPs), local area agreements (LAAs) and sub-regional and regional networks, including:

- Advice Alliance East
- Commission for Equalities and Human Rights
- COVER (Community and Voluntary Forum for the Eastern Region) and the wider voluntary and community sector
- Criminal justice agencies
- Disability East (regional disability partnership)
- EEDA
- EERA
- EERA’s LSP Network
- EERA’s Strategic Migration Partnership
- Employers’ organisations
- Environment Agency, Forestry Commission, Natural England and other environmental organisations
- Future East (the regional forum on ageing)
- GO-East
- Health and Safety Executive
- Health Service and Care Services Improvement Partnership – Eastern Region
- Highways Agency
- Inspire East (regional centre of excellence for sustainable communities)
- Investing in Communities partnerships
Chapter 1 – Vision, aims & objectives

- Jobcentre Plus
- Learning and Skills Council
- Legal Services Commission
- local authorities
- MENTER (Minority Ethnic Network for The Eastern Region)
- Rural Action East and its network of rural community councils
- sub-regional economic partnerships.

1.4 Vision
To achieve social inclusion throughout the East of England.

1.5 Aims
- To continue to analyse the causes of social exclusion and describe how it is experienced in this region, using the definition established in the first edition of this strategy.
- To bring together as good practice guidance the evidence for effective intervention at a regional and local level, including case studies of positive interventions around the region.
- To provide a framework for concerted action in tackling social exclusion around the region.
- To bridge the gap between regional strategy and local action, encouraging ‘ownership’ of the strategy by its delivery partners.

1.6 Strategic objectives
The following comprise the strategy’s key objectives, many of which are supported by the region’s LAAs and the Regional Economic Strategy:

1. to tackle poverty and reduce income inequalities (SO1)
2. to promote access to work, tackle low pay and improve conditions of work (SO2)
3. to improve the life chances of children from disadvantaged families and support vulnerable young people in the transition to adulthood (SO3)
4. to improve the life chances of adults through learning and skills development (SO4)
5. to promote active ageing and reduce social exclusion of older people (SO5)
6. to support the development of sustainable communities (SO6)
7. to improve access to services, especially for disadvantaged groups (SO7)
8. to develop social networks, community assets and promote community cohesion (SO8).
1.7 The regional context

The role of the East of England Regional Assembly is to promote the social, economic and environmental well-being of the region. Within this context, the Regional Social Strategy is one of a suite of strategies that together form the Integrated Regional Strategy (IRS). The IRS provides a clear statement of EERA’s regional priorities and an overarching context for the development of regional strategies in the future, including an assurance that they will be based on principles of sustainable development.

As key regional strategies, including the IRS itself, are developed and reviewed, alignment of their parallel review processes helps ensure that they remain complementary to each other. The critical importance of social inclusion for the economic development of the region, for example, is acknowledged in the Regional Economic Strategy which has ‘inclusion’ as one of its strategic goals.

A new factor in delivering the Regional Social Strategy is the increasing emphasis in the social economy on commissioning out social services from the public sector to the private and ‘Third’ sectors. This is a shift in government role, at national, regional and local level, from a direct provider of services to an enabler of services. Agencies such as the Regional Offender Management Service, the Legal Services Commission, the Learning and Skills Council, Jobcentre Plus, EEDA, GO-East, the Strategic Health Authority and local area agreement bodies are preparing plans to commission services rather than directly provide services. This will increase the number of agencies involved in delivering the outcomes of the Regional Social Strategy.

Another factor to take into account is the potential impact of the London 2012 Olympics. EEDA’s Economic Impact Study of the London 2012 Olympic Games and Paralympic Games (July 2006) suggests that, with intervention in key areas, the gross benefits to the East of England from the London 2012 Olympic Games and Paralympic Games could exceed £600 million.

The Olympics represent significant opportunities for the social, cultural and economic development of the region, as well as a potential catalyst to focus minds and generate action. If the region is truly to benefit from tourism and other business activity related to the Olympics, however, it is essential to have a cross-regional and co-ordinated approach to maximising these benefits through key interventions.

Without such an approach the 2012 Games could have a potentially negative impact on the sustainable development of the region. This is due in part to resources flowing from the region, and the loss of lottery monies – the East of England’s proximity to the 2012 Games alone will not guarantee benefits. There will also be some risks for the East of England to manage, including a drain of skills from the region and competition for funding and other resources.
1.8 The Regional Social Strategy development process

A multi-agency project team, drawn from the statutory, voluntary and community sectors developed the strategy and carried out the subsequent triennial review resulting in this second edition. Throughout the development and review of the strategy the project team has been committed to an inclusive process in which a significant and representative number of stakeholders have helped to shape the document in partnership with members of EERA’s Social Inclusion Panel.

The review has drawn widely on questionnaire responses gathered from around the region and on feedback from two days’ of action planning sessions. During these sessions participants were invited to comment on strengths and weaknesses of the strategy, highlight relevant recent developments for consideration and contribute to the strategy’s refreshed action plan.

The evidence base of the strategy has also been refreshed, with the inclusion of updated statistical references, where comparable sources have been identified.

The following key themes, originally identified by stakeholders as adding value to sub-regional and local social inclusion work, remain pertinent and have informed the on-going development of the strategy:

- raising awareness, engaging in advocacy and ensuring regional commitment to social inclusion
- clarifying the regional policy agenda and working to achieve coherence
- working to ensure a concerted approach by regional agencies
- supporting local action
- facilitating learning, identifying and promoting good practice and encouraging both evidence-based practice and innovation.

The penultimate theme, in particular, has been a focus of the review, which has sought to engage LSPs, the voluntary and community and private sectors, and other local delivery partners, in joint ‘ownership’ of an action plan which genuinely reflects local and sub-regional priorities as well as regional and national ones.

1.9 Timescales

This strategy is concerned with effecting change over the long-term and as such is looking at a ten-year period from its initial publication in 2004. EERA is committed to reviewing and refreshing the strategy at three-year intervals, this edition representing the first of those refreshes.
Chapter 2 – An overview of social exclusion

2.1 Profile of the region

Communities

The East of England is a diverse region that covers over 19,000 km² and is home to over 5.4 million people, 43% of whom live in rural local authorities (as defined by the Office of National Statistics’ classification of urban and rural local authorities). It consists of medium-sized urban areas, many adjacent to Greater London, intermixed with market towns and smaller rural settlements; 25% of all England’s market towns are in the East of England region.

Affluence and deprivation

The region is commonly assumed to be affluent because it lacks major conurbations or post-industrial areas experiencing intense deprivation and poverty. It is in parts subject to growth pressures particularly around London and Cambridge, with implications for affordable housing, infrastructure and social cohesion. Yet other parts, particularly Norfolk and Suffolk, face problems associated with remote, peripheral areas that have limited employment opportunities, low wages and lack access to services. There are also significant pockets of urban deprivation.
Population growth
The region has the fastest growing population in England, fuelled by a combination of indigenous growth and net in-migration from London. The age structure is typical of England, although there are intra-regional variations, with Tendring and North Norfolk ranking in the top ten local authority districts for people aged 65 and over (Census 2001).

Ageing
The population is ageing, with wide ranging socio-economic implications for the region that has the second highest number of pensioner households living in poverty. 50% of the regional population is expected to be over 50 by 2020 (The Implications of an Ageing Population for the Sustainable Development of the East of England, Population Ageing Associates, 2003). Of these it is estimated that 60% will either be disabled or a carer for a disabled person before retirement age. Effectively this equates to one third of the region’s population (1.8 million people). The Eastern Region Public Health Observatory (ERPHO) estimates that 60% of all local authorities in the region will experience an increase of up to 4% in their dependency ratio between 1998 and 2008. The dependency ratio quantifies the relationship between the economically active part of the population and the non-economically active, or ‘dependent’, part of the population.

Population frailty
The 2001 census indicated that some 23% of the regional population either has ill health or long-term medical conditions. As the population ages that trend is likely to increase.

Living alone
The census also indicated that in 2001 38% of the adult population in the region lived alone. This is an increasing long-term social trend and has implications in terms of health, housing, well-being and social inclusion and the long-term provision of social care in the increasing absence of family support structures.

Diversity
While the Black and minority ethnic (BME) population is relatively low, it is concentrated in particular areas, eg Luton with a BME population of 28%. There are also significant numbers of isolated groups in rural areas. There may be undercounting of minority ethnic communities, eg a large number of migrant workers, primarily connected with the agricultural industry, who do not appear on census or other official statistical data. A recent Gypsy Caravan Count showed the East of England region to have the highest number of caravans at 3,889, representing 24% of the England total (Gypsy Caravan Count, Office of the Deputy Prime Minister – ODPM, 2006).

Poverty
There are as many households living in poverty in the region as are to be found in other ‘deprived’ parts of the country, indeed as many as in the North East region. In addition, the social and economic features of the region have contributed to a rise in over-indebtedness. Pockets of deprivation exist in some rural, coastal and urban areas. Structural changes including the loss of an estimated 60,000 jobs in agriculture, the closure of important industries and the decline of seaside towns are all contributing factors. The problems are often obscured by averaged district level data and it is therefore important to look beyond the headline statistics in any analysis of social exclusion.
Some population groups are particularly at risk of social exclusion. These include: BME groups, people with disabilities or mental health needs, lone parents, older people, carers, asylum seekers, refugees, migrant workers, Gypsies and Travellers and ex-offenders.

In May 2007 the Government's Welfare Reform Act received royal assent. It reinforced the commitment to achieving an 80% employment rate and proposals relating to people claiming incapacity benefits, lone parents and older workers became law. Achieving an 80% employment rate in the East of England would mean over the next ten years reducing the number of people claiming incapacity benefits by 66,000 and the number of lone parents claiming Income Support by 8,000. The Act also includes the introduction of a new benefit called the Employment and Support Allowance, which will eventually replace Incapacity Benefit, and a simplified form of Housing Benefit called the Local Housing Allowance.

An independent report to the DWP by David Freud, *Reducing Dependency, Increasing Opportunity: options for the future of welfare to work*, was published in January 2007. It looks at the Government’s challenge over the next decade to meet their 80% employment aspiration, alongside delivering other social goals, including most importantly the further reduction of child poverty, and sets out a number of recommendations regarding those on Jobseeker’s Allowance, lone parents, those who are sick or disabled and how back-to-work support is delivered. In July 2007 the DWP published its green paper *In Work, Better Off: next steps to full employment*, which builds on the measures in the Welfare Reform Act, sets out the Government’s response to David Freud’s report and reinforces the principle of rights matched to responsibilities, with work for those who can and security for those who can’t.

For more detailed information regarding the region, visit the Regional Observatory at [www.eastofenglandobservatory.org.uk](http://www.eastofenglandobservatory.org.uk).
2.2 Definitions

Social exclusion is about more than income poverty. It is a broad concept that can mean different things to different people. The dominant definition in national policy is that of the Social Exclusion Unit (SEU):

_Social exclusion is a shorthand term for what can happen when people or areas suffer from a combination of linked problems such as unemployment, poor skills, low incomes, poor housing, high crime environments, bad health, poverty and family breakdown._


These problems are mutually reinforcing, and social exclusion is an extreme consequence of what can happen when people are exposed to them throughout their lives, often because of disadvantage they face at birth. This disadvantage can be transmitted from one generation to the next.

The SEU (under the Cabinet Office of central Government) preceded the current Social Exclusion Taskforce, and was created by the Government in 1997 to reflect its determination to take a cross–government approach to improving the life chances of the most disadvantaged in our society.

In September 2006 the Taskforce published _Reaching Out: an action plan on social exclusion_, which outlined what actions across central Government would be taken to improve the life chances of those who suffer from, or may suffer in the future, from disadvantage.

Social inclusion is the long-term outcome which this strategy is working towards:

_Social inclusion is not quite the mirror image of social exclusion. Social inclusion is sometimes described as citizenship, but it also incorporates the idea that people are not only able to make choices, but feel that what they choose to do will make a difference to themselves, their families and their communities, ie a sense of control._

2.3 Social exclusion in the East of England, its main causes and impacts

A central feature of social exclusion is low income. Poverty is defined as 60% median income after housing costs and is associated with many disadvantages that are perpetuated across generations. For example, children in low-income households have a higher risk of experiencing unemployment, ill health and low income in later life (Households Below Average Income 1994/5-2004/5, DWP). Poverty can carry through to old age because people cannot save for their retirement.

Discrimination is also considered to be a major cause of social exclusion. For example, individuals may face discrimination in the work place or in accessing training opportunities.

Communities can also be discriminated against, not because of who they are but because of where they live or what they look like. This in turn can affect access to services and increase social isolation for people already at risk of social exclusion, often people with mental health needs, older people, BME communities and lone parents.

Cultural differences and misunderstanding can create tensions, very often racial, within a community. In addition, the common use of the medical model of disability, which focuses on the individual’s condition, reinforces negative images and attitudes. In contrast, the social model more helpfully views disability as a potential limitation of opportunities to fully participate in society because of society’s barriers. The 2005 report, Improving the Life Chances of Disabled People (Prime Minister’s Strategy Unit), has the aspiration that within 20 years ‘disabled people in Britain should have full opportunities and choices to improve their quality of life and will be respected and included as equal members of society.’

While some discrimination may occur as a result of individual prejudice and/or ill-informed personal opinion affecting the judgement of those who control access to resources, services or work, it can also happen at an institutional level, as a result of policies and practices that unintentionally have the effect of treating some people less fairly than others. Statutory agencies, whether national, regional or local have a particular responsibility to ensure that all people have equity of access. While all public agencies are required to collect equal opportunities data across a range of services, we need to better understand how that data is being used to effectively intervene and tackle discrimination.

2.3 – SO1: To tackle poverty and reduce income inequalities

Income differentials have increased over the past 20 years and the number living in relative poverty as increased. Poverty can affect anyone but some groups are particularly at risk. These include some pensioners, lone parent families, workless households, people with low qualifications, people who live in particular areas and types of housing, some BME groups and disabled people.

i) Who experiences poverty in the East of England?

- 34% of all households in the region have an income of £15,000 or less per annum (Paycheck, CACI Limited, 2003).
- People who are working, but who are in poverty, represent a larger group than the unemployed or pensioners in poverty (nearly 30% of those living in poverty live in working households) (Households Below Average Income 1994/5-2004/5, DWP).
- An estimated 17% of individuals, 22% of children and 25% of pensioners are in low-income households. Overall, an estimated 884,000 individuals in the region are below the poverty threshold (Households Below Average Income 1994/5-2004/5, DWP).
• It is estimated that one million people in the region cannot afford essential household items (*Monitoring Poverty & Social Exclusion*, Rahman et al, York, Joseph Rowntree Foundation – JRF, 2000).

• It is estimated there are 118,081 lone-parent households in the region (Census 2001).

• The number of people claiming Incapacity Benefit in the region, as of June 2007, was 176,778 (Jobcentre Plus, Office of the Director).

• On average, benefits represent 35% of the income of lone-parent households, compared to 6% for two-parent families and 5% for the population as a whole (*Family Resources Survey*, DWP, 2006).

• Unemployment rates for some minority ethnic communities and people with disabilities are over twice the regional average rate.

• Refugees face many challenges such as language, recognition of qualifications and access to training, which in turn can impact on employment opportunities.

• There are pockets of poverty throughout the region, but there is a concentration of low-income wards in the coastal areas, the north of the region and some urban areas.

• Research shows that benefit take-up is lower in rural areas, among home-owners and for certain types of benefit, particularly Minimum Income Guarantee/Pension Credit and Working Families Tax Credit (*Poverty & Social Inclusion in Rural Areas*, New Policy Institute for Observatories Social Exclusion Partnership – OSEP, 2004).

• Over-indebtedness and personal insolvency are rapidly increasing in the region. Stevenage, for example, has the eighth highest number of individual voluntary arrangements in the country, while Colchester, Great Yarmouth and Basildon all appear within the top 20 ranked towns for levels of personal bankruptcy (*Town Territory Ranking for Bankruptcy*, Experian, 2006).

**ii) Main influencing factors**

There are three main factors associated with entry into, or escape from, poverty:

• **labour market events**

  Employment and/or change in earnings are the most important events associated with entry into and escape from low income. Lack of work is an important risk factor for short-term and persistent low income. Nationally, among those of working age on persistently low incomes, 60% are in workless households. Income differentials are generally increasing, and there is little earnings mobility for people on low incomes.

• **family-related events**

  Divorce and childbirth are also associated with changes in income and/or loss of home. Sometimes work events and family-related events are connected: for example a divorce may lead to a loss of work if a lone parent cannot make adequate childcare arrangements.

• **civil justice problems**

  People who are already vulnerable to social exclusion are also more likely to encounter problems relating to rented accommodation, homelessness, welfare benefits, crime, mental health and other ‘civil justice’ issues which can exacerbate poverty (*Causes of Action: civil law and social justice*, 2nd Edition, Legal Services Research Centre, 2006).
2.3 – SO2: To promote access to work, tackle low pay and improve conditions of work

The SEU’s Policy Action Team report, Jobs for All (2000), argued that providing employment opportunities for all was the single most effective means of tackling poverty and social exclusion. It showed that when people in the bottom fifth of income distribution gained work the chance of them increasing their income was very high: almost eight out of ten who had moved from joblessness into work between 1991 and 1995 had moved up the income distribution out of the bottom fifth.

The opportunities to access jobs are unequal. They depend significantly on where people live, their health, age, family circumstances and ethnic background.

- The International Labour Organisation unemployment rate for ethnic minority groups in the East of England is twice the regional average.

- Unemployment rates for disabled people are also much higher than the regional average. Of those who become disabled while in work, one in six lose their employment during the first year after becoming disabled.

- In terms of scale, economic inactivity is more significant than unemployment and while the region’s overall activity rate is high, only 22.79% of female lone parents are in full-time employment. Overall, just 54.15% of all lone parents are either in full-time or part-time employment (Census 2001). Being a lone-parent increases the risk of non-employment by 45% with the risk higher in this region than in the rest of the country (Disadvantage and Multiple Disadvantage in the East of England, Jäckle on behalf of OSEP, 2004).

- In addition, users of social care services, most notably people with mental health problems, currently make up more than half of the recipients of Incapacity Benefit (Reaching Out: an action plan on social exclusion, Social Exclusion Taskforce, 2006). The average employment rate for the average UK working age population is 74%, which compares with 47% for all people with a disability, but only 21% of people with long-term mental illness are in work and this is as low as 12% for people with severe mental illness (Labour Force Survey, Nomis, 2006).

- Employment rates for older workers are also relatively low compared with other age groups. In the past 20 years, the proportion of men aged between 50 and state pension age who are not working has doubled. A third of people in this age group are not working (Winning the Generation Game, Performance & Innovation Unit – PIU, 2000). Early exits from work have significant costs to society, in terms of lost gross domestic product, taxes and extra benefits. Most of the people who leave work early are not rich: almost half receive most of their income from state benefits. They are not in general replacing paid work with community activities and can experience growing disillusionment and exclusion (Winning the Generation Game, PIU, 2000). In the East of England, economic activity rate among people aged over 50 is 38.3% compared with 84% for 25-49 year olds (Labour Force Survey, Nomis, 2006).

- Over recent years there has been a steady increase in the number of migrant workers coming to the East of England, with migrants originating from all over the world making an essential contribution to the region’s ongoing economic success. Research has uncovered some appalling stories about the number of hours many of them work, the level of pay they receive and the less than equal treatment they experience at work. In addition, most migrant workers in the region are working below their skill level, even though the skills they possess can be in areas where there are major skill shortages (Migrant Workers in the East of England, EEDA, 2005).
i) Barriers to escaping poverty and social exclusion through work

The main barriers include:

- caring responsibilities
- quality of work and low pay
- over-indebtedness
- access to transport
- sickness, disability and poor mental health
- availability of childcare
- a lack of skills and qualifications
- English language proficiency
- discrimination.

Discrimination can be a major barrier to employment because of race, sex, age, sexual orientation or mental health, but it also cuts across many of the other barriers identified above.

Caring responsibilities

Almost 10% of the region’s population are acting as unpaid carers, with 3% providing care for more than 20 hours per week and 2% for more than 50 hours per week (Census 2001).

Quality of work and low pay

The rise of a dual labour market in the region, with an increasing number of high level occupations at one end of the spectrum and low paid, lower level occupations at the other, means that people can become trapped in insecure work, with low wages and poor terms and conditions.

- A growing body of evidence points to the fact that low pay and job insecurity can have a detrimental effect on people’s well-being.
- Evidence suggests that insecure workers are actually worse off in terms of health than those who are long-term unemployed (‘Degrees of Exclusion: developing a dynamic, multi-dimensional measure’, Burchardt et al, in Hills et al [eds], Understanding Social Exclusion, Oxford, Oxford University Press, 2002).
- Almost 30% of those living in poverty live in working households. The working poor represent a larger group than the unemployed or pensioner poor (Facts About Low Pay, Low Pay Unit, 2004).
- A full-time worker with a non-working partner would need to earn around £9 per hour to avoid income poverty. Five industries fail to do this for men, and around half fail to do this for women (Poverty & Social Inclusion in Rural Areas, New Policy Institute for OSEP, 2004).
- Low paid workers are unlikely to receive any job-related training which would help move them into a higher paid job in future (Poverty & Social Inclusion in Rural Areas, New Policy Institute for OSEP, 2004).

Tackling low pay is essential because poverty and low pay are intertwined throughout an individual’s lifetime and across generations. Therefore, we must be concerned not simply about jobs at any price but also about the quality and conditions of employment.
Low pay is a particular problem in rural areas: the proportion of employees on low pay is higher in rural East of England than in urban areas of the region. The largest low paying rural industries include agriculture, hotels and restaurants and the retail trade and, among part-time employees, health and social work. Fenland, North Norfolk and Waveney appear to have the highest prevalence of low pay (Poverty & Social Inclusion in Rural Areas, New Policy Institute for OSEP, 2004).

**Over-indebtedness**

Nationally, levels of over-indebtedness are rising, with insolvency levels increasing by 44.1% from 2005 to 2006 (Statistics Release: insolencies in the 4th quarter 2006, The Insolvency Service). In the same period Citizens Advice saw a 27% rise in debt problems nationally, with a 35% rise within the Eastern Region.

In the first half of 2006/7, the figures rose again by 13%, with the Eastern Region anticipating almost 1/4 million debt problems from clients in 2006/7 (Town Territory Ranking for Bankruptcy, Experian, 2006).
Access to transport

Transport can be a significant barrier to employment, particularly amongst young people in rural areas (Youth Unemployment in Rural Areas, Cartmel and Furlong, York, JRF, 2000) and for those with child caring responsibilities. There is evidence that both individuals and employers increasingly feel that, unless someone owns a car, they will not get and keep a job, and that public transport is irrelevant and not designed for those who are working (Lessons for Employment Policy, JRF, York, 2001). The SEU's report on transport and social exclusion shows that 1 in 4 young people do not apply for available jobs because of transport problems. 6% of 16 – 24-year-olds turn down training or education opportunities because of problems with transport. Lack of suitable and affordable transport provision is a major problem for disabled people wanting to access employment and is a very good example of barriers created by society rather than an individual's condition (Making the Connections: final report on transport and social exclusion, SEU, 2003).

Sickness, disability and poor mental health

Sickness, disability and poor mental health are key reasons for lack of employment. 12.7% of the economically inactive population are sick or disabled (Census, 2001) and 1 in 6 disabled people lose their jobs during the first year of acquiring their disability. People who are sick or disabled represent the biggest group among those who are economically inactive but want paid work.

Availability of childcare

Research shows that there is a link between childcare availability and the likelihood that a mother works. In the UK, about one quarter of non-working mothers report they would like to have a regular paid job, but are prevented from seeking work by having to look after children.

Lack of skills and qualifications

There is a strong relationship between people's qualifications and success in the labour market. The confidence, inter-personal skills and commitment that employers expect can be further undermined by lack of qualifications, basic skill needs and long-term unemployment (Mothers' Employment and Childcare use in the UK, Paull et al, London, Institute of Fiscal Studies, 2002). Education and skills are addressed in more detail under SO3 and SO4 below.

English language proficiency

A major barrier to employment for many groups including refugees and migrant workers is the lack of co-ordinated provision of language services, English Language classes, guidance and support, which in turn undermines effective integration and equal access to employment. (Research undertaken for Pathways to Employment project, 2003).
2.3 – SO3: To improve the life chances of children from disadvantaged backgrounds and support vulnerable young people in the transition to adulthood

i) Child poverty

Child poverty is particularly damaging because it has a long-term detrimental effect on people’s lives and across generations. Research has shown that even when they are in their 30s, adults have less chance of working and more chance of low pay if their families faced financial hardships when they were growing up. Child poverty must be seen in the context of the wider difficulties often experienced by disadvantaged children and families such as poor health, low qualifications, anti-social behaviour and, for a minority of children, living in care.

Despite being a wealthy nation, the UK has comparatively high levels of child poverty. The Government has set a target to halve the number of children in relative low-income households, on the way to eradicating child poverty by 2020. Although there are now 600,000 fewer children nationally in poverty, to achieve the target set for 2010 a further 1.2 million children need to be lifted out of poverty. In May 2006 tackling child poverty became the DWP’s number one priority.

Lisa Harker, former Chief Executive of the Daycare Trust, was appointed independent advisor on child poverty to the DWP in June 2006. Her report, *Delivering on Child Poverty: what would it take?*, was published in November 2006. The report argues that there has been an emphasis on helping lone parents back to work and that to meet child poverty targets activities need to be more attuned to the needs of parents in general, not just lone parents. The report goes on to say that for many parents a move into work is an escape from poverty, but in around 1 in 3 cases gaining a job means moving from non-working poor to working poor.

Whilst persistent poverty has fallen in non-working households it has not decreased in working households – nearly half (48%) of all children in poverty now live in families where there is someone in work.

*Child Poverty in Perspective: an overview of child well-being in rich countries* was published by UNICEF in February 2007 and is the first study of childhood across the world’s industrialised nations. UNICEF looked at 40 indicators from the years 2000-2003 including poverty, family relationships and health and placed the UK bottom of a league table for child well-being across 21 industrialised countries.

In response to Lisa Harker, UNICEF and a number of other reports, in March 2007 DWP published *Working for Children* which confirms the commitment to eradicate child poverty and sets out a number of new measures.

ii) Parenting

There is growing evidence of the importance of the nature of parenting in achieving good outcomes for all children and young people. The government initiative, *Every Child Matters*, 2003, emphasises the bond between the child and his or her parents as being the most critical influence on a child’s life. It is important that this bond is established very early in a child’s life, is strengthened by activities in the early months and is positively reinforced throughout the development of a young person. Where the relationship has been weakened or has not developed, the child has less resilience at any age or circumstances to deal with the normal developmental processes which he or she will encounter and will be more vulnerable to negative external influences, such as peer pressure to misuse substances. Children whose parents have supported their development build confidence and ability. Where there are additional difficulties, such as child poverty, the effect of poor parenting may be exacerbated.
In 2006 the Government commissioned research from PricewaterhouseCoopers which identified considerable gaps in the provision of parenting support, partly caused by weak, poorly co-ordinated commissioning processes. Building on these findings, in October 2006 the Government published parenting support guidance for local authorities in England. The primary recommendation of the guidance was for each local authority to develop a parenting support strategy.

### iii) Transition points

Although experience during early years is important, life chances continue to be forged throughout children’s lives. There are key transition points the successful negotiation of which has been shown to be critical for positive outcomes. These are commonly linked to the different stages of education, i.e., starting school, transition between schools (especially between primary and secondary schools when this may be linked to the onset of puberty) and leaving school to further education and training.

### iv) Transition to adulthood

Transition to adulthood follows certain distinct pathways: moving from school into the labour market, forming a household or family and achieving economic independence. While for many the transition is a long and smooth one, supported by families and friends, for others adulthood comes early, without the necessary skills and support.

There is an increasing polarisation between the experiences of young people who stay in education and gain qualifications, and those who leave school early, risking low pay and unemployment. There is also a growing divide between those who become parents in their teens and the majority who are increasingly deferring parenthood. Almost half of under-18 conceptions occur in the most deprived 20% of wards (East in Focus: East of England Health Profile 2001, ERPHO, 2002). While the teenage conception rate in the East of England is the lowest in England, there are clusters of wards, for example in sea-side towns with high deprivation, which have amongst the highest rates in the country. Teenage mothers are less likely to finish their education, less likely to find a good job and more likely to end up as single parents bringing up their children in poverty (Teenage Pregnancy, SEU, 1999). These children subsequently run a much greater risk of poor health and have a much higher chance of becoming teenage mothers themselves.

### v) Education

Performance within statutory education is measured at four Key Stages with Key Stage 4 being GCSE age (usually 16). In general, performance in education at Key Stages 1 and 2 (equivalent to the primary school age range) is above the England average although there are some authorities with performance below this level. Thurrock, Luton and Peterborough in 2006 fell within this category (Local Authority Data Report, Department for Education and Skills – DfES, 2006).

Performance at GCSE within the region is generally above the national average (46.5% scoring 5 A*-C grades, including English and maths, compared to 44.5% in England) (Local Authority Data Report, DfES, 2006) and has been improving over time, although Luton, Peterborough and Norfolk have lower scores than the national average. There is also a significant proportion of young people who fail to obtain any GCSEs. In Southend and Peterborough, in particular, this proportion is above the national average. Research has also shown that in rural areas a quarter of 16-year-olds failed to obtain any GCSEs above Grade C (Poverty & Social Inclusion in Rural Areas, New Policy Institute for OSEP, 2004).
There are other underlying trends which impact particularly intensely on young people from the region’s deprived areas. Despite limited improvements, the performance at GCSE, for example, is not sustained post-16 in some areas, with attainment at ‘A’ level or the equivalent vocational (GNVQ/NVQ) Level 3 qualification remaining below the national average in 5 out of 10 local education authorities (LEAs) (Table 8: Level 3 point scores of 16-18 year old candidates by gender in each local authority and Government Office region by the end of 2005/6, DfES). Participation in education and work-based learning among 16 and 17-year-olds is also below the national average in 6 of the region’s 10 LEAs (Participation in education and work-based learning of 16 and 17-year-olds, LEAs Tables, 2005).

If learning is a key factor for reducing deprivation and increasing social inclusion, continued improvements are required to target under-achievement among the significant minority of young people who fail to achieve basic qualifications, particularly in rural and deprived areas where under-achievement is concentrated. Learning providers will need to understand the demographic profile of their learners so that they can enhance access to opportunities for hard to reach groups.

**vi) Health**

The numbers of children with life-threatening or life-limiting illnesses are, thankfully, relatively low, though the impact of such illnesses on the children concerned, and their families, is immense. Because of the small numbers involved, and the time and emotional energy invested in their care, there are few resources such as lobby groups to help such children and their families. This can compound isolation and frustration, particularly for healthy siblings, for whom parental attention can seem to come at a premium.

It can also be a challenge to provide appropriate services to affected families, due to capacity issues and the fact that health professionals can have limited experience of some of the rare and complex medical conditions involved. This is particularly the case for babies born pre-term with multiple health issues, who are now living longer than would previously have been possible.
2.3 – SO4: To improve the life chances of adults through learning and skills development

Adults with poor literacy, language and numeracy skills may find themselves and their families excluded from advantages others take for granted. They may be in low-paid or short-term jobs or suffer lengthy periods of unemployment. People with inadequate literacy skills can typically earn 11% less than others, while those with inadequate numeracy skills earn on average 6%-7% less (Skills for Life: the national strategy for improving adult literacy and numeracy, DfES, 2001).

As well as losing out financially, people with low skills often lack confidence and motivation. Their children are more likely to struggle at school. They are more likely to suffer health problems. They are less likely to access the information they need or to make the most of available opportunities that will help them to live fulfilling and healthy lives.

<table>
<thead>
<tr>
<th>Borough</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maldon</td>
<td>32.8</td>
</tr>
<tr>
<td>Tendring</td>
<td>24.5</td>
</tr>
<tr>
<td>Uttlesford</td>
<td>21.8</td>
</tr>
<tr>
<td>Harlow</td>
<td>19.9</td>
</tr>
<tr>
<td>Thurrock</td>
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</tr>
<tr>
<td>Braintree</td>
<td>19.1</td>
</tr>
<tr>
<td>Luton</td>
<td>18.6</td>
</tr>
</tbody>
</table>

Annual Population Survey, Office for National Statistics

Skills for Life is the national strategy for improving adult literacy, language (ESOL – English for speakers of other languages) and numeracy skills. An important part is the framework of national standards for literacy and numeracy:
Adults of all ages benefit from being able to learn and develop new skills, whether through paid or unpaid (voluntary) work, or through formal learning, such as learning opportunities or vocational training. All such activities increase opportunities for mental stimulation, social engagement, sharing of experience and for enhancing people’s quality of life. Learning in later life is known to assist in reducing poor health and dependency on public services. In order to access wider learning, all adults need to have basic language, literacy, numeracy and, increasingly, information and communications technology skills. These are growing in importance for ensuring access to information thereby enabling people to have choices in, and control of, their lives. Free tuition is available to help many adults who need it to get a good skills foundation for employability, known as Level 2 qualification.

<table>
<thead>
<tr>
<th>Level</th>
<th>Literacy (reading)</th>
<th>Numeracy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Entry Level 1</td>
<td>• Understands short texts with repeated language patterns on familiar topics</td>
<td>• Understands information given by numbers and symbols in simple graphical, numerical and written signs and symbols</td>
</tr>
<tr>
<td></td>
<td>• Can obtain information from common material</td>
<td></td>
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<tr>
<td>Entry Level 2</td>
<td>• Understands short straightforward texts on familiar topics</td>
<td>• Understands information given by numbers, symbols, simple diagrams and charts in graphical, numerical and written material</td>
</tr>
<tr>
<td></td>
<td>• Can obtain information from short documents, familiar sources and signs and symbols</td>
<td></td>
</tr>
<tr>
<td>Entry Level 3</td>
<td>• Understands short straightforward texts on familiar topics accurately and independently</td>
<td>• Understands information given by numbers symbols, diagrams and charts used for different purposes and in different ways in graphical, numerical and written material</td>
</tr>
<tr>
<td></td>
<td>• Can obtain information from everyday sources</td>
<td></td>
</tr>
<tr>
<td>Level 1</td>
<td>• Understands short straightforward texts of varying length on a variety of topics accurately and independently</td>
<td>• Understands straightforward mathematical information used for different purposes and can independently select relevant information from given graphical, numerical and written material</td>
</tr>
<tr>
<td></td>
<td>• Can obtain information from different sources</td>
<td></td>
</tr>
<tr>
<td>Level 2 or above</td>
<td>• Understands a range of texts of varying complexity accurately and independently</td>
<td>• Understands mathematical information used for different purposes and can independently select and compare relevant information from a variety of graphical, numerical and written material</td>
</tr>
<tr>
<td></td>
<td>• Can obtain information of varying length and detail from different sources</td>
<td></td>
</tr>
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</table>
Chapter 2 – An overview of social exclusion

In the East of England significant numbers of adults have Skills for Life needs:

<table>
<thead>
<tr>
<th>Region</th>
<th>Literacy</th>
<th>English</th>
<th>Reading</th>
<th>Math</th>
<th>EL</th>
<th>L1</th>
<th>L2+</th>
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</tr>
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<tr>
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<tr>
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<tr>
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Base: all respondents with literacy scores (7873)

<table>
<thead>
<tr>
<th>Region</th>
<th>Numeracy</th>
<th>English</th>
<th>Reading</th>
<th>Math</th>
<th>EL</th>
<th>L1</th>
<th>L2+</th>
</tr>
</thead>
<tbody>
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<tr>
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<tr>
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<td>49</td>
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<td>23</td>
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<tr>
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<tr>
<td>London</td>
<td>48</td>
<td>26</td>
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<tr>
<td>East of England</td>
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<td>32</td>
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</tbody>
</table>

Base: all respondents with numeracy scores (8041)

Although there are basic skills needs throughout the region, the areas of greatest need are concentrated in major towns and cities and along the coast of the region, particularly in Ipswich, Luton (largely concentrated within the Pakistani and Bangladeshi communities), Suffolk Coastal, Harwich, Basildon, Thurrock, Tendring and Fenland. (Adult Basic Skills in the East of England, BMG, 2002).
The national Skills for Life survey (DfES, 2003) showed that very few people regarded their reading, writing or maths skills as below average, including those with the lowest levels of ability. For example, 54% of those with Entry Level 1 or lower level literacy said their everyday reading ability was ‘very’ or ‘fairly’ good.

There is little regional data available about the Skills for Life needs of the adult population who are post-working age (ie aged 60+ for women and 65+ for men), but it can be reasonably assumed that amongst the younger people in this group the proportion with poor Skills for Life and no qualifications will be similar to that of the ‘working age’ population.

Nationally, it is estimated that there are at least half a million people who struggle with English because it is not their first language. Nearly half of those with a different first language were classified at Entry Level 3 or below in the literacy test of the Skills for Life survey (roughly the standard expected of 11-year-olds).
2.3 – SO5: To promote active ageing and reduce social exclusion of older people

The population of the East of England is not only growing at a faster rate than other English regions, it is ageing. Projections suggest that by 2014 the number of people in the UK aged 65 and over will exceed the numbers aged under 16. By 2025 there will be more than 1.6 million more people over the age of 65 than people under 16 (The Implications of an Ageing Population for the Sustainable Development of the East of England, Population Ageing Associates, 2003).

The effects of increasing age combined with other factors such as reduced income or mobility can exacerbate exclusion. Members of ethnic minorities aged over 50 can experience the ‘double disadvantage’ of age and ethnicity (Aspects of the Economics of an Ageing Population, Select Committee on Economic Affairs, 2003).

A number of factors increase the risks of social isolation and exclusion for older people living in rural areas:

- on retirement people may move away from friends and family, to more remote areas such as the Norfolk and Suffolk coast
- in areas popular with retired people, house prices for first time buyers may be prohibitively expensive which in turn creates an imbalance in local communities that over time become dominated by older people. This exacerbates the risk of isolation at a later stage, particularly as half of all people aged 65 and over living in rural areas have a limiting long-term illness (Poverty & Social Inclusion in Rural Areas, New Policy Institute for OSEP, 2004)
- exclusion often begins when an older person becomes unable to drive – three-fifths of older single women do not have a car (Poverty & Social Inclusion in Rural Areas, New Policy Institute for OSEP, 2004)
- meeting the medical needs of older people can often be more difficult in rural areas.

i) Housing

Housing is an important dimension of social exclusion for older people who occupy much of the sub-standard housing in the country. Nationally, 68% of householders over the age of 65 are owner-occupiers, 32% of whom are living in poverty (Poverty & Home Ownership in Contemporary Britain, Burrows, York, JRF, 2003). For these households, maintaining the property can become increasingly difficult, resulting in disrepair and poor housing conditions such as damp and condensation. Older people on low incomes are twice as likely to live in energy inefficient housing as those on high incomes.

They are also more likely to experience fuel poverty, which occurs when people need to spend more than 10% of their income on fuel to achieve adequate levels of warmth in the home. The causes of fuel poverty are complex, but contributory factors include low household income, poor insulation standards, inefficient or expensive heating systems and under-occupancy of properties. In addition, many households contain individuals who may require extra warmth as a result of age or disability.

The number of ‘excess winter deaths’ is defined as the number by which the mortality rate for the period December to March exceeds that of other months of the year. A greater proportion of the over 60s than of any other age group make up the 20,000 to 50,000 excess winter deaths that occur in the UK each year, the exact number being related to the severity of the winter weather. Many of these deaths are attributable to conditions caused or exacerbated by poor housing and by living in fuel poverty. During the winter months, there are 15% more deaths of people aged 65+ in the East of England.
The Government's first Fuel Poverty Strategy was published in 2001. It included a target for ending fuel poverty in vulnerable households (defined as a household containing children, or those who are elderly, sick or disabled) and non-vulnerable households living in social housing by 2010 and ending fuel poverty in other households by November 2016 (UK Fuel Poverty Strategy 4th Annual Progress Report, 2006).

The number of UK households in fuel poverty fell from 6.5 million to 2 million between 1996 and 2003. Of these, vulnerable households in fuel poverty fell from 5 million to 1.5 million. Government moves to boost the incomes of the poorest, especially pensioners, accounted for over half of this reduction; falling energy prices for about one fifth; and government initiatives to improve energy efficiency of homes for a further one fifth.

Rising energy prices since 2003, however, have reversed this trend. Domestic energy bills rose sharply between 2003-6 – up 94% for gas and 60% for electricity. By winter 2006/7 the annual energy bill for the average UK household was over £1,000 compared with only £572 in 2003. The number of households in fuel poverty has risen again as a result – up to an estimated four million – twice the 2003 level (Energy Shouldn't Cost the Earth, National Consumer Council, March 2007).

Although some energy companies announced price cuts in early 2007, these have been relatively modest – 12-17% for gas and 3-11% for electricity. Energy prices are unlikely to fall back to 2003 levels and fuel poverty is still likely to affect significant numbers, seriously threatening achievement of the Government's fuel poverty targets.

In terms of general support, the proportion of people provided with home care/help to help them live at home is lower in the region than elsewhere in the country (Poverty & Social Inclusion in Rural Areas, New Policy Institute for OSEP, 2004).

ii) Health

Social exclusion experienced as a result of poor health is often exacerbated by old age. For example, a study for the DWP found that amongst people aged 50-69, a fifth had been forced to retire or leave a job because of ill health (Factors Affecting the Labour Market Participation of Older Workers, Humphrey et al, London, DWP, 2003). The health of immediate and extended family members was also important – caring responsibilities had affected paid work for 20% of people.

A greater proportion of 60 to 69 year olds have anxiety and depression than any other group. This is often compounded by bereavement and, in some cases, by retirement. Research has highlighted the inadequate provision for older people with mental health difficulties, including the overuse of institutional care and lack of intermediate care (Improving Older People’s Services: an overview of performance, Bainbridge & Ricketts, London, Department of Health, 2003).

iii) Services

While providing services in the home may meet the needs of older people on one level, transport is also important as it enables people to access social networks and engage with the wider community which has a positive impact on individual well-being. At particular risk of social isolation in rural areas, are single, older women, many of whom live alone and without a car (Poverty & Social Inclusion in Rural Areas, New Policy Institute for OSEP, 2004).
iv) Income and the labour market

A quarter of female single pensioners live in poverty, representing one of the poorest groups of older people (One in Four, Age Concern and the Fawcett Society, 2003). This is because fewer women have made sufficient contributions to entitle them to a full basic state pension and they are less likely to benefit from occupational pension schemes. Twice as many women as men rely on means-tested benefits in retirement (One in Four, Age Concern and the Fawcett Society, 2003).

Large numbers of pensioners are failing to claim their income-related benefits. The process of making a claim is long and complicated and, for some, carries a stigma. Research shows that older people from BME communities face a number of barriers to claiming benefits, including language problems, concerns about the impact of claiming on residency status and difficulties arising from not having a national insurance number (Delivering Benefits & Services for Black and Minority Ethnic Older People, Barnard & Pettigrew, London, DWP, 2003).

People leaving work before the state pension age risk being poorer in retirement than if they had continued working, with those on low incomes particularly vulnerable (Money, Choice & Control: the financial circumstances of early retirement, Arthur, York, JRF, 2003). People in their 50s and early 60s who may have had little or no choice about leaving their job often find it difficult and increasingly dispiriting seeking other paid employment (Money, Choice & Control: the financial circumstances of early retirement, Arthur, 2003). Health difficulties, age discrimination and a lack of skills and financial resources mean that older people are more likely to become detached from the labour market and dependent on benefits until state retirement age.

However, the ageing population in the East of England means the labour force potential amongst the over-50s in the region is growing. A study suggested that over 225,000 people over the age of 50 in the region would welcome remunerated employment (The Implications of an Ageing Population for the Sustainable Development of the East of England, Population Ageing Associates, 2003). Without the barriers to employment described above, older people could be making a significant contribution to the regional economy, supplementing the workforce required to support an ageing population that will continue to increase in tandem with developments and investments in health and social care.

v) Communities and social networks

The networks, relationships and values that shape people’s lives and the communities they live in can have a significant impact on quality of life for individuals, and also for whole communities in terms of economic and social outcomes. For some older people, for example those less able to leave their home, a lack of social contact and engagement within the community may lead to feelings of isolation and mistrust. It may also cause an increased fear of crime, particularly for women. Women aged 60 or over are three times as likely to feel very unsafe out at night as men. Women from lower income households are one and a half times as likely to feel unsafe as women from higher income households (Monitoring Poverty & Social Exclusion, Palmer et al, York, New Policy Institute and JRF, 2003).

2.3 – SO6: To support the development of sustainable communities

i) Housing

Housing is integral to achieving broader social, economic and environmental objectives such as improved educational attainment and health status.
The majority (74%) of households in the region live in owner-occupied accommodation, 16% in social rented and 10% in private rented (Housing Statistics, Table 109, Communities and Local Government – CLG – website, www.communities.gov.uk).

Social housing

Recent research (The Demand for Social Rented Housing, CLG, 2007) shows that nationally three main groups are likely to be in social housing:

- households for whom the sector is a permanent, long-term secure tenure for life. These households are generally more disadvantaged in terms of income, health and disability, with lower participation in the labour market than those who are more transitory
- households for whom social renting is a relatively temporary or transitional tenure
- those who enter the sector at a later stage in their life, often for the first time.

The research shows clear concentrations of poverty and exclusion in the social rented sector, with those with other housing opportunities likely to choose the private sector.

Nationally, greater numbers of ethnic minority groups are moving into social housing but the proportionate rise is more the extent to which white households are leaving the sector. In the East of England, BME groups account for 5% of the population but Black households are twice as likely to be in Council or other social rented accommodation than Asian households (24%, compared with 12% for Asian households) (Study into the Housing Needs of Black and Minority Ethnic Communities in the East of England, Centre for Regional Economic and Social Research, Sheffield Hallam University, 2006).

Affordable homes

The region needs 11,000 new, affordable homes per year (Affordable Housing Studies, Cambridge Centre for Housing and Planning Research, Part 1 [2003] and Part 2 [2004]) but in 2005/06 produced less than half that number at 4,042 (Annual Monitoring Report 2005/6, EERA, 2007).

The acute housing stress is manifest in increased housing waiting lists and problems of affordability. On 1 April 2006 a total of 135,444 households were registered on local authority housing waiting lists in the region compared to 129,184 in 2005 (Housing Strategy Statistical Appendix Data, CLG, 2006). The average house price in the region in the first quarter of 2001 was £114,300 compared to £201,000 in 2006, a 76% increase (Annual Monitoring Report 2005/6, EERA, 2007). The lower quartile price threshold (the price threshold below which 25% of all sales occurred) doubled from £65,000 to £130,000 during the same period. The multiple of lower quartile earnings required to purchase a lower quartile home is on average 7.5, rising to 10 in the most expensive parts of the region.

Effects of overcrowding

There is a body of evidence (The Impact of Overcrowding on Health and Education: a review of the evidence and literature, Office of the Deputy Prime Minister – ODPM, 2004) that suggests a relationship between overcrowding and health, including long-term effects. For example, overcrowding in childhood can have an impact on aspects of adult health and therefore potentially affect an individual’s life chances and opportunities in the future. The estimated number of households living in overcrowded accommodation in the region using the most recent data (2002-05) was 31,000; the estimated number of children living in overcrowded accommodation was 63,000 (Hansard written answers, 18 April 2006).
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The Decent Homes standard

At the end of March 2007, 41,110 local authority-owned homes in the region fell below the Government’s Decent Homes Standard (GO-East monitoring, 2007), which requires that all properties must have effective heating and insulation, kitchens under 20 years old, bathrooms under 30 years old and must be warm and watertight. The Government’s PSA7 (Public Service Agreement 7) target requires that by 2010 at least 70% of vulnerable households in the private sector have decent homes. Research carried out in 2006 and recently updated by GO-East and EERA suggests that between 60% and 76% of vulnerable households in the region are living in decent homes.

Homelessness

The number of households in the region accepted as homeless and in priority need has fallen in recent years from a high of 11,190 in 2003/04 to 8,260 in 2005/06. This reflects the Government’s focus on preventing and reducing homelessness. Nonetheless, there is a rising trend in repossessions, which increased from 10,310 to 17,000 between 2005 and 2006 (Council of Mortgage Lenders research, 2007). In the East of England there were 1,921 possession orders and 2,018 suspended possession orders (Economic and Statistics Division of the Department for Constitutional Affairs, 2007).

The Government has also introduced targets for a reduction in the use of temporary accommodation (to halve the number of households living in insecure temporary accommodation by 2010) which the region has made good progress towards meeting. This follows an earlier target (to end the use of bed and breakfast hotels for families for longer than six weeks and then only in an emergency) which the region met in 2004. With regard to young people, a ‘snapshot’ survey in December 2006 revealed one hundred 16-17 year olds in bed and breakfast accommodation in the region.
Black and minority ethnic accommodation

The region has the largest Gypsy and Traveller population in England but the historic under-provision of accommodation has led to a problem of unauthorised sites. Recent research (Regional Spatial Strategy Single Issue Review of Gypsy and Traveller Caravan Sites, EERA, 2007) shows that the region needs an estimated additional 1,200 caravan pitches over the five-year period to 2011 to address the accommodation of the Gypsy and Traveller community.

While the 2001 census is the main data source for mapping the BME population in the region, it is not sufficient for mapping the diversity, dynamics and localised settlement patterns of that population (Study into the Housing Needs of Black and Minority Ethnic Communities in the East of England, Centre for Regional Economic and Social Research, 2006). The evidence base is patchy and data collection and monitoring systems are weak, despite the statutory and regulatory framework that exists, which raises concerns that some housing providers are not meeting their statutory duties.

The region has a rapidly expanding migrant worker population, often housed in private rented or employer-provided accommodation which is of poor quality. Recent work by the Audit Commission (2007) showed that in 2002 Breckland District Council regularly inspected around 40 homes of multiple occupation. By summer 2006 they had a database of 480.

The study also shows that few recent migrant workers are offered social housing tenancies, since many come on special schemes, visas and permits and have no rights to them. Communities and Local Government figures show that only 110 accession state nationals have been offered social tenancies since 2004. However, once EU citizens gain residency rights, they become eligible for assistance under homelessness legislation. They will also be eligible to join other local tenants and residents on waiting lists, increasing demand for affordable housing.

Asylum seekers and refugees

Housing for asylum seekers in this region is provided by a single private accommodation provider, Clearsprings Management Ltd, under contract to the Border and Immigration Agency. Asylum seekers are dispersed to Peterborough, Norwich or Ipswich. The upper limit in each site is 150 service users, a regional total of just 450 asylum seekers at any one time.

If an asylum seeker is granted refugee status and is eligible for social housing, Section 11 of the Asylum and Immigration Act 2004 creates a local connection with the local authority to which the asylum seeker was dispersed. One of the main concerns for those granted refugee status is that they receive the full 28 days’ notice to vacate their dispersal accommodation in order to find alternative housing, which may include local authority housing if they are eligible. Liaison systems therefore need to be in place between local authorities and the accommodation provider to ensure that authorities are given early notification of potential refugee homelessness. Local authorities also need to ensure that the specific needs of refugees are acknowledged in local housing strategies.
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Implications of regional growth

Considerable growth has been outlined for the region through the Government's proposed changes to the draft East of England Plan. Any significant development of housing requires concomitant social investment, ensuring that:

- 'out of town' development includes an infrastructure of appropriate services and transport links
- there is investment in the voluntary and community sector in key areas of need such as advice provision, infrastructure bodies and counselling services to ensure additional demands placed on the this sector are met.

The scale and nature of such provision will need to vary in accordance to the size of the area being developed, proximity to existing services and socio-demographic characteristics.

ii) Neighbourhoods and the environment

Neighbourhoods and the wider physical environment are just as important to an individual’s health and sense of well-being as the bricks and mortar. People living in estates with a poor reputation can find themselves stigmatised and disadvantaged in the labour market. Concentrating the poorest and most vulnerable households in the least popular estates with the highest turnover of tenants has been criticised for reinforcing social exclusion.

Anti-social behaviour causes fear of crime, particularly amongst vulnerable groups such as older people and lone parents, and has the effect of contributing to neighbourhood decline (Policy Action Team Report 8, SEU, 2000). The impact of racial harassment and prejudice should also be recognised in this context as it similarly undermines and fragments communities.

Research shows that people are also concerned about dirty streets and public spaces strewn with litter, dog mess, abandoned cars and graffiti; unattractive and inaccessible parks, play areas and open spaces with poor provision for children and young people, older people and disabled people (Living Places: caring for quality, ODPM, 2004).

An unattractive and threatening environment can lead to an area becoming stigmatised and drive people, businesses and investment away. In the words of one resident living on an estate in the region: ‘Living in certain streets round here means banks, shops, etc don’t want to know.’

Deprived communities suffer disproportionately from road accidents, which are the most common cause of injury death for children aged 5-14 and for young adults. Whilst accident rates for car occupants are falling in the region, the overall pedestrian rate is not, with the increase in child pedestrian accidents a particularly worrying trend.

Noise, air pollution and disruption caused by traffic are greatest amongst deprived communities and have serious health implications (Making the Connections: final report on transport and social exclusion, SEU, 2003). Other research reinforces this strong relationship between poor air quality and socio-economic deprivation (Environmental Quality & Social Deprivation, Environment Agency, 2004). The study also shows that integrated pollution control sites are disproportionately located in deprived areas of England and that tidal floodplain populations are strongly biased towards deprived communities. Socially excluded people are particularly vulnerable following disasters such as widespread flooding, often being less able to cope with recovery and requiring special support. Recent research carried out in Lewes, East Sussex, which experienced severe flooding in 2000 showed that people whose homes were flooded were four times more likely to suffer from psychological distress than those who weren't flooded, and that flooding was
also associated with increased risk of a range of health problems (Health Impacts of Flooding in Lewes: a comparison of reported gastrointestinal and other illness and mental health in flooded and non-flooded households, Health Protection Agency, 2004).

Indeed, the Stern Review report, The Economics of Climate Change (2007), predicts that temperature increases related to carbon emissions will result in increasing examples of extreme weather patterns. In this region, as elsewhere, it is socially excluded people who will be most vulnerable to the ensuing environmental and economic impact of climate change.

iii) Cultural opportunities

A lack of opportunity to participate in cultural activity can exacerbate many of the components which are used to define social exclusion, such as low self-esteem, isolation from wider society and other individuals, low aspirations, poor educational attainment and lack of basic skills, as well as lack of civic pride and identification with the interests of the local community.

Involvement in culture can build relationships between people from different backgrounds and create vibrant, inclusive, safer and more cohesive neighbourhoods. Community cultural initiatives provide a focus for social interaction, reducing the likelihood of neighbourhoods falling into decline. A positive self-image, strengthened by the sense of belonging generated by culture, means individuals feel motivated and committed.

Places like libraries, museums and sports clubs build social capital – not just through their work, but by creating a shared social space where different people can come together and learn more about each other. Schemes to provide cultural activities for people in rural areas can help to reduce feelings of isolation and develop community cohesion.

Culture can engage young people, including those who are at risk or marginalised, in a variety of productive and socialising activities and give them access to new skills. Taking part in cultural activities can also help to divert young people from crime, providing a constructive and positive focus for interest and effort.

Culture brings people together, helping to celebrate diversity while respecting differences. It is what turns a disparate group of people into a community.

iv) Crime

There is more crime in the poorest and most deprived areas. The Policy Action Team Report 6 (SEU, 2000) found that nationally 40% of crime takes place in just 10% of areas. 25% of BME residents in low-income multi-ethnic areas reported racially motivated attacks as being a significant problem.

Perceptions of crime can also vary significantly from the actual statistical evidence. Certain groups such as young people are often perceived as being perpetrators of crime, yet the statistical evidence shows that they are at high risk of becoming victims of violent crime. Across the population the risk of being a victim of violent crime is recorded at 3.6% (British Crime Survey, 2006-7), whereas 13.8% of young men aged 16-24 who were interviewed as part of this survey had experienced some form of violent crime in the preceding year.

Although annual crime statistics published by the Home Office show that the East of England is still one of the safest regions to live, work and visit in the country (with rates of recorded violence, robbery, burglary, vehicle crime and criminal damage below those recorded for England and Wales) this is still a significant community concern. Latest information (Home Office Drugs Strategy, 2002) suggests that heroin, crack and cocaine users are responsible for 50% of crimes such as shoplifting, burglary, vehicle crime and theft. Therefore, interventions targeting drug users and preventing re-offending by ex-prisoners will have a significant impact.
on crime reduction. To be effective these will need to be cross-cutting, covering key issues such as housing, skills development and employment. According to a report by the Home Office (*Tackling Drugs. Changing Lives: turning strategy into reality*, 2007), for every £1 spent on treatment, at least £9.50 is saved in crime and health costs.

Prisoners have multiple needs, including learning and physical disabilities. At any one time there are over 16,000 adults, young offenders and juveniles from the East of England in prisons (*Criminogenic Needs*, National Offender Management Service Offender Assessment System – NOMS OASys, 2007).

Of these:

- 33% will lose their tenancy before release
- 72% will experience mental health problems (at least two disorders)
- 82% will have worse writing skills than an 11-year-old
- 20% will have attempted suicide in the past
- 25% will have a drugs misuse problem (highest in Norfolk and Bedford)
- 45% will have an alcohol misuse problem (highest in Suffolk).

(*Criminogenic Needs, NOMS OASys, 2007*)

There are two conclusions to draw from these statistics:

- significant numbers of people using social support services will have been in the hands of criminal justice agencies at some point
- those clients will have multiple problems and therefore will need to engage with multiple agencies. If those agencies work in isolation, they will fail to take into account actions by other services that will affect their delivery of support. For example, a community-based education programme is likely to fail if the offender has nowhere to live after prison.

v) Health

Social exclusion and health inequalities, which persist within the region, have many of the same root causes. Elements of social exclusion such as low income, unemployment and lack of social support and networks are also strong determinants of poor health. Socially excluded people and communities are likely to be less healthy than their socially included counterparts. Preventing deprivation and social exclusion will therefore impact positively on health and health inequalities in the region.

Although the Index of Multiple Deprivation score for the whole of the East of England is lower than the England average, there is wide variation within the region, from the least deprived Hertfordshire at 6.3 to the most deprived, Norwich at 28.3. There is strong evidence that increasing levels of deprivation and social exclusion are associated with decreasing levels of life expectancy in both men and women. Even though overall life expectancy in the region is higher than the national average, there are obvious inequalities within the region. For example, life expectancy in Fenland and Luton is approximately four years lower than in South Cambridgeshire, for both men and women.
Periods of illness, disability and caring duties have economic and social costs for individuals, families and society. Overall 12.7% of the economically inactive population of the region are classed as sick or disabled (Census 2001). This compares with 16.01% for England. At 206,900 the number in receipt of sickness-related benefits far exceeds the number claiming Jobseeker’s Allowance (60,515) and represents 50% of those claiming working age benefits (417,675) in the region. People with poor mental health or physical disabilities can also experience stigma and discrimination. Asylum seekers, refugees and migrant workers often have additional health needs compounded by difficulty in accessing services in the UK. Ensuring the prompt diagnosis and effective treatment of illnesses that may affect an individual’s productivity (in employment, full-time education or a caring role) or their ability to build and maintain social relationships are key actions for health care providers.

Recent research (Is work good for your health and well-being?, Waddell and Burton, DWP, 2006) suggests that there is a strong relationship between health and work:

- being in the right type of work is good for your health. It improves self esteem, quality of life and well-being
- being out of work is bad for both mind and body. Unemployment progressively damages health and results in more sickness, disability, mental illness, obesity, use of medication and medical services and decreased life expectancy
- when people return to work from unemployment their health improves. Returning to work from unemployment improves health by as much as unemployment damages it
- if you have a health condition, being in work can help your recovery
- remaining in or returning quickly is beneficial for people with both physical and mental health problems
- the positive effects of work do not just benefit the individual. Work also reduces poverty and health inequalities for the family and the community
- although aspects of work can pose a risk to health, far more people gain benefits from work than are negatively affected by it. The benefits of work are also greater than the harmful effects of prolonged sickness absence
- the positive effects of work apply to all age groups.

Caring for sick or disabled people is another way in which an individual and their family are at risk of social exclusion. Particularly vulnerable are young people with caring responsibilities as they are much more difficult to identify and support. As the population of the region ages the number of people caring for dependent elderly people will increase. The government white paper Our health, Our Care, Our Say: a new direction for community services (2005) acknowledges this and calls for better support for those with caring responsibilities.

The East of England has the fifth largest population of non-White British residents in the UK. There are some large ethnic populations throughout the region especially in areas such as Peterborough and Luton. Health varies between (and within) ethnic populations. Chinese populations in this region tend to experience better health, while Bangladeshis and Pakistanis suffer from poorer health. National surveys of NHS patient experience show that Asian groups experience worse access to services than other ethnic groups across all the regions (health data from Census 2001, ERPHO, 2004).
Chapter 2 – An overview of social exclusion

Gypsies and Travellers constitute one of the largest minority ethnic groups in the East of England. The East of England has 25% of England’s Traveller community, which represents the highest recorded number of caravans in England (A Review of the Health Needs of Gypsy Travellers in the East of England, Regional Public Health Group, 2006). Gypsies and Travellers have significantly poorer health and more self-reported symptoms of ill health than other UK residents, including BME groups and economically disadvantaged white UK residents (Healthy Futures: a regional health strategy for the East of England 2005-2010, EERA, 2005). Maternal and child health are especially problematic, with Gypsies and Travellers often experiencing great difficulty in accessing preventative health services.

Indeed, health inequalities between Gypsies & Travellers and the general population are some of the starkest in the region, with Gypsy and Traveller women living on average 12 years less and Gypsy and Traveller men 10 years less than their counterparts in the wider community (Gypsies & Travellers Strategy, Commission for Racial Equality, 2004-7).
2.3 – SO7: To improve access to services, especially for disadvantaged groups

Access to services is influenced by physical, financial, cultural and language factors. These potential barriers to social inclusion can also be exacerbated by poor confidence and trust in service provision, inappropriate forms of service delivery and discrimination by service providers.

In rural areas, social exclusion can be disproportionately influenced by access to services, as even the most basic of community services such as grocery shops, banks and doctors’ surgeries may be difficult to reach. The loss of local facilities like these from small towns and villages impacts on social exclusion where people are unable to travel, or find it difficult to travel to access services further afield.

Lack of services also impacts on feelings of community vibrancy and cohesion. Rural households in the East of England have poorer geographical availability of key services compared to the average for rural England. Data provided by the Countryside Agency, now part of Natural England, shows that the East of England has the smallest proportion of households living within a set distance of 9 out of 11 key services, in particular:

- banks and building societies (65.1% of rural households live within 4 km)
- dental surgeries (74.7% of rural households live within 4km)
- hospitals (only 16.7% of rural households live within 4 km).

i) Financial services

Financial exclusion and spiralling debt are growing problems for low-income households. Costs can be higher for people without access to mainstream financial services as, for example, utility companies often charge lower prices if bills are paid by direct debit. Likewise those least likely to have household insurance are the most likely to be burgled, and may also find it more difficult to deal with the financial loss.

Nationally,

- 1 in 6 of the poorest households still do not have any type of bank account
- lone parents are three times as likely to have no account as the average household
- Bangladeshi and Pakistani households are twice as likely as the average household to have no bank account
- half of the poorest households are uninsured.

*(Monitoring Poverty & Social Exclusion, Palmer et al, York, New Policy Institute and JRF, 2003).*

ii) Information and advice services

Lack of effective information, representation and advice can preserve and extend inequality and disadvantage, increasing the risk of exclusion by denying access to services such as health, housing and training. This in turn has a negative impact on employment prospects, quality of life and community cohesion in general.

Language barriers too present particular problems for migrant workers and refugees, for example when seeking work or trying to understand the benefits system. Failure to provide information in the appropriate format combined with the lack of interpreters can reinforce rather than reduce social exclusion.
Information and communications technology (ICT) has an important role to play in increasing accessibility to information and advice, especially in rural areas. Broadband coverage has increased dramatically since this strategy was first published, now technically available to 99.5% of the region’s population, though this falls to 98% in rural communities (*The State of the Countryside*, 2006, Commission for Rural Communities).

The concept of ‘digital exclusion’, however, is not just about ensuring everyone can access internet facilities, but also about making sure they have the skills to do so, and that there is appropriate content for them. It has been reported that excluded groups, such as people who are jobless, homeless, mentally ill, in prison, on probation or carers, find little on the internet that is of direct relevance, perhaps because much internet content is driven by commercial forces and is therefore aimed at higher income consumers (*Beyond Access: ICT and social exclusion*, Fabian Society, London, 2001).

### iii) Transport services

The extent to which individuals are able to access appropriate transport services is a significant factor in both creating and reinforcing social exclusion.

Lack of transport, and poor accessibility, have been identified as barriers to employment (see SO2 above), education and healthcare services (*Making the Connections: final report on transport and social exclusion*, SEU, 2003). They can also limit an individual’s opportunities to develop and maintain social networks. According to the SEU’s report, over 1.4 million people in England said they had missed out on medical help over the previous 12-month period because of access difficulties.

People with physical disabilities can experience particular difficulty as in many cases adaptations have not been made. Transport access problems are particularly acute in rural areas where the distances required to travel tend to be greater, and public transport less frequent.

- 16% of rural households do not own a car and 20% of adults in rural areas do not have a full driving licence (*Annual Monitoring Report*, East of England Local Government Conference, 2003).
- Cost is a major barrier. Low-income households dependent on a car spend nearly a quarter of their weekly household expenditure on motoring (*Making the Connections: final report on transport and social exclusion*, SEU, 2003). Proposals to ease congestion through road pricing (*The Eddington Transport Study*, London, HM Treasury and Department of Transport, 2006) need to take into account the potential impact on social exclusion where affordable and accessible public transport alternatives do not exist, such as in remote rural areas.

- Many railway stations are not accessible to wheelchair users.

The two types of households who are least likely to own a car and are therefore most disadvantaged by poor access to services are single pensioners and lone parents. Almost a third of the 50,000 lone parents and 60% of single pensioners in the rural districts of the East of England do not own a car. Older, single women pensioners are the group of greatest concern. Many live alone and relatively few receive support from the local authority. Those living in small parishes often lack a local shop. All these factors combine to increase the likelihood of social isolation (*Poverty & Social Inclusion in Rural Areas*, New Policy Institute for OSEP, 2004).
2.3 – SO8: To develop social networks, community assets and promote community cohesion

i) Social networks

Social exclusion occurs as a result of the complex interplay between poverty, poor life skills and social disconnectedness. Social relationships provide people with valuable resources that are not dependent on income. They enable individuals to connect to different types of help: emotional support, practical help (e.g., childcare) financial aid (e.g., loans) and information (e.g., about job opportunities).

Parents who are vulnerable to social exclusion may not have such strong support networks or such wide access to help and advice. The transition from childhood to adulthood is an important time when lack of strong social support networks through friends, family or colleagues makes a person vulnerable to social exclusion. Retirement and old age are times when a person can become more socially isolated, either through disconnection from colleagues or through death of friends and family. Social networks are also a very important support to asylum seekers, refugees and migrant workers who invariably have limited knowledge of the English language and lack of understanding of UK culture and systems.

People with good social networks live longer, are at reduced risk of coronary heart disease, are less likely to report being depressed, or to suffer a recurrence of cancer and less susceptible to infectious illness than those with poor social networks.
ii) Community assets

The Government has said that one reason why some past regeneration strategies failed is that they did not make use of the knowledge of those with the most at stake – local people. Research has shown that regeneration will only be successful and sustainable if a holistic approach is taken, underlining the importance of striking a balance between ‘people’ and ‘place’ based regeneration that builds on existing community assets rather than a ‘deficit’ model of community (Research to inform the Investing in Communities programme, DTZ, 2003).

iii) Community cohesion

Studies in Luton (Sticking Together: embracing diversity in Luton, Luton Borough Council, 2003), Norfolk (Norfolk at Ease: a county with a vision of inclusive communities, Norwich & Norfolk Race Equality Council, 2003), Peterborough (Policing Peterborough, Cambridgeshire Constabulary, 2006) and regionally (Migrant Workers in the East of England, EEDA, 2005) have identified the problems raised by poor community cohesion. These show that a lack of community cohesion intensifies social exclusion and leads to:

- a widening of inequalities among people of different backgrounds. The barriers that are identified in this chapter increase disproportionately for some BME communities, including asylum seekers, refugees and migrant workers
- an increase in racist attacks and in the violence of racist attacks
- increasing poor achievement in certain communities in education and in employment. This in turn leads to poor levels of self-esteem and confidence or belief in the community’s social value
- increasing inequalities in access to basic services, such as housing
- increasing inequalities in health, including lower life expectancy
- poor information and advice that prevents communities tackling problems
- polarised and segregated communities.

The complex range of factors considered in this chapter can combine to create a cycle of deprivation that impacts on an individual throughout the course of their life. Intervening at key stages in an individual’s life can help to break the cycle of deprivation and social exclusion:

- the most important is early childhood and even pre-birth, as poverty, deprivation and stress at this stage can significantly increase a person’s risk of social exclusion
- the transition from childhood to adulthood is also a key stage. Supporting young people into meaningful work, developing social connections and strong self-esteem can protect them from social exclusion in the future
- life events such as unemployment and relationship breakdown are also important triggers of social exclusion. Policy interventions at these key points can help to break the complex cycle of exclusion
- the evidence clearly shows that older people are particularly vulnerable to the many dimensions of social exclusion.
Chapter 3 – Effective interventions

This chapter considers a range of interventions to address some of the issues and problems identified in Chapter 2. Reflecting the complex mix of factors that contribute to social exclusion, it comprises a number of different elements including prescribed government policy, evidence of effective interventions and promising approaches. It also reflects the guiding principles laid out by the Social Exclusion Task Force, in that it aims to:

- identify and target those at most risk of social exclusion and encourage early intervention
- identify ‘what works best’ and share that knowledge
- promote multi-agency working, for example through LAAs
- ensure individuals understand their right and responsibilities.

It should be noted that it is primarily focused on flagging up ideas, some of which may not be amenable to conventional intervention research.
Key
Where described interventions feature in the current action plan, these are colour-coded with a reference to the relevant objective and action. ‘SO1: 2, 3’, for example, relates to actions 2 and 3 under Strategic Objective 1.

3.1 – SO1: To tackle poverty and reduce income inequalities

As shown in Chapter 2, poverty and discrimination are at the heart of social exclusion. However, many of the policies that directly enhance the income of those in poverty are the remit of central Government and are beyond the scope of this strategy.

In terms of regional and local policies, there are five main types of intervention that can help tackle poverty:

1. policies and actions to promote economic development, investment, enterprise, job and wealth creation, particularly in deprived areas and for disadvantaged groups (SO1: 1), eg through the Investing in Communities (IiC) programme and LAAs

2. mainstream services such as health and social care, civil justice resolution, childcare and housing that minimise the social impacts of poverty and support people in need. Some of these areas are examined separately in other sections of this strategy

3. local provision of free and subsidised services and activities

4. policies and provision that target income maximisation, personal indebtedness and financial inclusion (SO1: 2, 3)

5. policies and practice to tackle discrimination and promote equality and diversity (SO1: 4).
3.1 – SO2: To promote access to work, tackle low pay and improve conditions of work

Since employment is the single most effective means of tackling poverty and social exclusion, improving access to the labour market is a key challenge for regional policy. Yet, it is not about providing jobs per se. More specifically, it is well-paid, secure employment that helps to move people out of persistent poverty.

i) Labour market interventions

Appropriate interventions should reflect the needs of individuals but could include approaches which:

- increase the take-up of both welfare-to-work and in-work benefits and allowances
- promote employment as an essential part of the recovery process especially for people with mental health needs (SO2: 10). This should be done primarily but not exclusively through health systems
- offer debt and financial literacy advice and access to sources of credit
- assess and address basic literacy, numeracy and ESOL (SO2: 2) needs
- improve ‘employability’ through skills analysis and training support (SO2: 3, 5)

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Case study 1

Norfolk’s Local Area Agreement (LAA)

Members of the Norfolk County Strategic Partnership have developed a pilot scheme in Great Yarmouth, as part of their LAA, to look at defining the number of low income families in over-indebtedness and increasing the take-up of welfare benefits.

When clients make contact with Great Yarmouth Citizens Advice Bureau, Norwich Citizens Advice Bureau (which also delivers services in Great Yarmouth) or Great Yarmouth Borough Council Welfare Rights Team advisors check their benefit entitlement and ensure this is being claimed. In the first six months of the scheme this amounted to an average of £300 additional income per client.

In addition, clients who contact these agencies with debt problems are asked anonymously to provide information, which is helping to build up a picture of levels of over-indebtedness in the Great Yarmouth area. This will inform future service provision in the area.

The Government Office for the East of England (GO-East) has cited this pilot as an example of good practice and recommended its wider implementation. Similar projects are now run by Citizens Advice in other areas, including parts of Cambridgeshire and Essex, one receiving the following recent endorsement from a client:

> I am writing to thank you sincerely for your help in completing the Incapacity Benefit form. Your explanation of the system was hugely helpful and left me feeling a great deal more confident and much less anxious about the way it all works.

> You were very reassuring at a time when my confidence is low... In addition, your letter was very clear and coming so speedily after our meeting was so helpful in clarifying everything.
Chapter 3 – Effective interventions

- promote Jobcentre Plus disability employment advisors and services offered through Access to Work to people with health conditions and disabilities
- promote Jobcentre Plus New Deal lone parent advisors and support offered to lone parents with training, job search and childcare provision
- promote intermediate labour markets and social enterprise to facilitate entry into the job market for disadvantaged individuals
- promote diversity in the workplace (SO1: 4 and SO2: 1, 2, 3, 6)
- remove barriers to employment for those with caring responsibilities (SO2: 7)
- create sustainable jobs as part of economic development strategies
- improve skills and quality of workforce development for those in low-value jobs (SO2: 1, 2, 4) through vocational training and employment practices in the workplace
- promote the benefits of volunteering (SO4: 4 and SO6: 12) in terms of improving an individual’s skills and confidence and providing a valuable ‘stepping-stone’ to future (paid) employment opportunities
- promote healthy workplaces (SO2: 9).

While such interventions clearly benefit the individual, there are also longer-term benefits for the community as a whole in terms of increased productivity and reduced dependency on welfare benefits.

Case study 2

Pathways to Work

The green paper Pathways to Work: helping people into employment was published in November 2002, leading directly to the setting up of the Pathways to Work pilots, which included Essex in the East of England.

Under Pathways to Work customers making a new or repeat claim to Incapacity Benefit attend an interview with a trained advisor who explains the features of the Condition Management Programme (CMP). CMP is a partnership between Jobcentre Plus and the NHS and provides support for customers with certain health problems. This voluntary programme does not try to treat the illness but aims to improve the customer’s understanding of their condition and offers help and support in dealing with the condition.

To complement the role of the CMP providers, job brokers also help customers to look for work. Since the pilot in Essex was launched in April 2004 over 3,500 have found work.

Jobcentre Plus and primary care trusts in Bedfordshire and Luton have developed an Investing in Communities funded project, Healthy Steps to Employment, which is based on the CMP model, and which aims to help 850 people move from Incapacity Benefit into work over a three-year period.

As part of the Government’s wider welfare reforms, Pathways to Work is to be made available nationally from December 2007.
Case study 3

South Essex Partnership NHS Foundation Trust

South Essex Partnership NHS Foundation Trust is using an individual placement and support approach with four community mental health teams (CMHTs) and the Forensic Services Community Team.

An employment specialist is based within the clinical team and co-works with community psychiatric nurses and social workers to achieve the aims of the individual’s care plan in relation to social inclusion through paid employment, vocational education and voluntary work.

Any service user of the CMHT who expresses the desire to return to work is offered the support of the employment specialist. This support takes the form of initial discussion about work history, employment goals, skills and training, negative experiences at work to be avoided, whether job retention is required, and how many hours of work are desired. As soon as clear actions are identified, the job search begins, usually within a month of the first meeting.
Chapter 3 – Effective Interventions

Case study 4

Migrant workers’ information portal

In response to the issue of access to information highlighted in *Migrant Workers in the East of England*, EEDA, 2005, a project has been established to provide information and advice to migrant workers through a single ‘gateway’. The project is delivered by Advice for Life in Cambridge and Keystone Development Trust in Thetford.

Activities include:

- a telephone action line providing essential information to migrant workers in six key community languages
- provision of information to migrant workers through weekly live-chat sessions
- a telephone action line providing essential information to employers, trade unions and practitioners working with migrants
- a website providing information, advice and guidance for migrants and employers.

The project aims to rationalise the sources and diversity of information by providing a single gateway to what is available. This is in line with good practice thinking across Europe.

For more information visit: [www.migrantgateway.eu](http://www.migrantgateway.eu).

Case study 5

The Enterprising Women project

Although the East of England is one of the fastest growing regions in the country, only a third of its new businesses are set up by women. The Enterprising Women project, funded by EEDA’s Investing in Communities programme, and delivered by a group of business support organisations, sets out to redress the balance.

Enterprising Women delivers a variety of high quality, tailored training at every stage of a company’s development. Some topics are particularly relevant to women, such as confidence, fear of failure and risk, and others are key challenges for all growing companies, such as increasing sales, growth, pricing and value.

The project’s website, [www.enterprising-women.org](http://www.enterprising-women.org), features profiles of women-owned businesses in the region, along with resources and information. In addition, Enterprising Women runs events all over the region, bringing women together around common themes and encouraging new contacts and relationships.

*Women have a pivotal role to play in the region’s continued growth and EEDA along with partners must tackle the barriers that are stopping as many women as men setting-up their own business.*

David Marlow, Chief Executive, EEDA.
ii) Corporate social responsibility

The business sector has a key role to play in tackling deprivation and social exclusion. There is scope to improve our capacity to harness private sector investment and innovation in the regeneration of deprived communities \((\text{SO2}: 8)\), which can also pay dividends in terms of business success. For example, there is increased recognition of the positive role of businesses as ‘corporate citizens’, committed to socially responsible practices in recruitment, investment, vocational training and procurement.

Public sector corporate practices also offer many opportunities to tackle exclusion, and together with procurement policies can support local employment and help to keep money within local economies. For example, the NHS spends £5.5 billion per annum on purchasing goods, facilities and services in the region (\textit{Health & Social Care and Sustainable Development Study}, NHS, 2004).

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**Case study 6**

The Yard Project, Lowestoft

Barclays’ Banking on Brighter Futures initiative supports the Yard Project in Lowestoft to work with 16 – 24-year-olds who are not in education, employment or training.

The 18 young people currently in the project are transforming a derelict builder’s yard into a training centre and community resource. At the same time they are acquiring essential work experience and skills, and will also receive help and support to move on to permanent employment when they are ready to do so.

It is anticipated that ultimately 160 families and members of the community will benefit in some way from the project. Indeed, the project already enjoys wide support from local residents, with one couple donating fresh water from their own tap each morning, in the absence of a mains supply!

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3.1 – SO3: To improve the life chances of children from disadvantaged families and support vulnerable young people in the transition to adulthood

Policy solutions need to encompass the risk factors that can cause children and young people to be vulnerable to exclusion. The following factors have been shown to have a significant impact and therefore should be a focus of policy:

- early childhood interventions, targeted at the most disadvantaged \((\text{SO3}: 3, 5, 6, 9, 10, 11, 14)\)
- measures to raise the quality of childcare and early childhood education for pre-school age children \((\text{SO3}: 4, 7, 10, 12)\)
- access to good quality play opportunities, which are essential to mental and physical well-being, learning and development \((\text{SO3}: 4)\)
- targeted interventions to support the most vulnerable children and young people through their development and focused at key transition points of their lives \((\text{SO3}: 2, 3, 8)\)
- support to parents to encourage them in their parenting roles with targeted and specialist support for parents of children requiring additional support \((\text{SO3}: 7, 12)\)
• raising educational attainment of children and young people (SO3: 2, 3, 11)
• providing additional opportunities for all young people to develop social skills and knowledge for transition to adulthood but using a range of specialist interventions for those most vulnerable to exclusion (SO3: 3, 12, 13)
• targeted interventions within a system which is about helping every child or young person achieve his or her potential (SO3: 5, 6, 9, 10, 14)
• increased access to employment opportunities for lone parents, to redress child poverty (SO3: 1).

In particular, there is strong evidence to support the cost-effectiveness of early childhood interventions. Because early investments lay the groundwork for later success, the benefits of pre-school interventions accumulate and are compounded over time. Surestart is an example of public policy, implemented at a local level, which provides comprehensive support for families in disadvantaged communities.

Educational attainment is an important tool for overcoming childhood disadvantage. This is particularly evident where programmes are accompanied by measures to support parental involvement, enhance community provision of health and social care (as in the full-service extended schools/children’s centre model (SO3: 12) and stimulate and extend children and young people’s life experiences through after-school and holiday activities. The provision of integrated services is especially important for children with multiple disadvantage or complex needs.
Case study 7

Young Community Champions
Laura McPartlin successfully applied for a Pathfinder Young Community Champions award. Her grant enabled her to undertake training in creative musical techniques, building on skills gained during her drama degree. Subsequently she has been organising workshops in Peterborough which target disadvantaged young people from a range of ethnic backgrounds. As well as using drama and movement to help build relationships within the group and confidence within individuals, the workshops are also used to explore aspects of healthy living and other issues affecting young people.

Fusing different performance styles can build a creative understanding within the group you are working with and can open people’s minds to the diversity in the world around us and enable them to develop as members of their community.

Laura McPartlin, Pathfinder Young Community Champion

Case study 8

Young people and culture
In Wisbech headteachers are keen to ensure that their children and young people make full use of the cultural opportunities on their doorstep. They are working together with Cambridgeshire Community Services and Museums, Libraries and Archives East of England to define what is ‘on offer’ culturally in the locality and to maximise the potential of local collections, places and people in drawing communities together.

This encourages children and young people to grow up understanding where the people who make up their community come from, their stories and their traditions, helping them to develop their own sense of identity as well as providing role models to inspire active citizens of the future.

This model is also being trialled in Lowestoft, Thurrock and Stanway.

Policy context
When the Government consulted children, young people and their families, they wanted an approach which was about every child achieving his or her full potential and in which children, families, communities and professionals worked together.

There was a broad agreement that the following five key outcomes really matter for children and young people’s well-being:
1. being healthy: enjoying good physical and mental health and living a healthy lifestyle
2. staying safe: being protected from harm and neglect and growing up able to look after themselves
3. enjoying and achieving: getting the most out of life and developing broad skills for adulthood
4. making a positive contribution: to the community and to society and not engaging in anti-social or offending behaviour
5. economic well-being: overcoming socio-economic disadvantages to achieve their full potential in life.

*(Every Child Matters, 2003)*

Raising aspirations is a key priority for improving the life chances of young people and supporting the transition to adulthood, but they cannot be expected to work on their own. Family relationships and family life have a significant influence, family policies need to be considered alongside youth and education policies *(SO3: 12).*

Enhancing personal and social development for young people is an area in which the voluntary and statutory youth services have particular expertise.

**Case study 9**

**Romsey Mill’s Young Parents’ Programme**

Romsey Mill is a Cambridge charity which specialises in work with socially excluded youngsters and developing activities with families in the surrounding community.

Their Young Parents’ Programme equips teenage parents with the skills required to break the cycle of exclusion that entraps them and their children. The programme teaches teenage parents and expecting parents through home visits and tailored courses and provides the ongoing support required for them to progress. Courses also contain embedded learning on literacy and IT use.

*I wish school had been like this. It feels nice and small and comfortable and I get talked to like an adult. Reckon I would have got my GCSEs if it had been like this, but I bunked off all the time.*

Programme participant

Youth services within the East of England region have a range of activities and services which work effectively with young people around substance misuse, teenage pregnancy, anti-social and risky behaviour as well as providing a wide range of opportunities for all young people. This expertise has been put to good use in the holiday activity programme Positive Activities for Young People where the target groups are those at risk of offending, or poor school attainment and the programme activities encourage community cohesion in areas where inter-racial tensions are apparent.

Sport and access to nature are also very effective means of tackling social exclusion and promoting well-being. The Regional Woodland Strategy promotes the establishment of a number of forest schools *(SO3: 3)* in the region, a concept that has developed from the important role of play in learning. The forest school provides a permanent, natural but safe setting, in which children have the freedom to roam and to experience the natural world through practical activities. They are mainly aimed at pre-school age and Key Stage 1 children, but older, disaffected children and those with learning difficulties can thrive in the positive atmosphere.
More generally, the relationship between children and young people and their environment, creating a sense of ownership and place, is now recognised as an important element of education. The Government’s Sustainable Schools Programme aims to integrate high standards of achievement and behaviour with goals of healthy living, environmental awareness, community involvement and citizenship.

Positive Futures is a Home Office managed programme that aims to address social exclusion by using sport to engage and work with marginalised young people. It seeks to have a positive influence on a participating individual’s drug use, physical activity and offending behaviour by widening horizons and access to lifestyle, education and employment opportunities.

Every Child Matters (2003) is changing the landscape and the culture of the delivery of services for children and young people in England. The structural and practice changes it proposes to drive forward better services for children are designed to enhance the protection of all 0-19 year olds and promote their well-being through developing preventative work and better shared information about children’s needs. It also aims to maximise potential, especially by improving educational attainment, reducing youth offending, improving children’s health, particularly mental health (SO3: 9), and reducing teenage pregnancy. Underpinning all this work is a commitment to consult and involve children and young people, as well as their families, in the design delivery and evaluation of the services provided to them.
Chapter 3 – Effective interventions

Government’s policy focuses on four main areas:

1. supporting parents and carers with better universal services (eg schools, health), in addition to targeted and specialist services and some compulsory orders to help combat youth offending

2. early intervention and effective prevention, with improved information sharing, common assessment, a clear lead professional for children using services and multi-disciplinary teams working closer to the communities in which children and young people live

3. accountability and integration locally, regionally and nationally, with children’s services directors accountable for local authority education and social services; a lead council member for children; key services integrated into children’s trusts and local safeguarding children’s boards to improve child protection services

4. workforce reform to improve the recruitment, training and retention of children and young people’s workers (SO3: 13), supported by a workforce reform strategy.

(Every Child Matters, 2003)

i) Education

The key policy areas for children and young people’s learning and education that impact most on social exclusion are:

- early years education
- consistently high standards of teaching and learning
- support for times of transition, primary to secondary and post-16
- the integration of disadvantaged pupils and those at risk of exclusion
- opportunities for informal learning through high quality youth work and personal development opportunities, especially with vulnerable and disaffected young people

Case study 10

Braintree Community Sports Project

This is a social inclusion project run by Braintree District Council in partnership with Nacro. The project uses sport, predominantly football, as a tool to engage young people who are excluded from school, have particularly challenging backgrounds or behavioural and learning difficulties.

Through structured opportunities for young people to take part in sport and physical activity, the project aims to reduce anti-social and nuisance behaviour, increase self-esteem, communication and teamwork skills and provide positive role models.

*It has given me patience and respect and made me better at football and I have learned to respect the other people on the pitch and hopefully I can use the skill I have learned like patience and respect in my classroom so that I don’t get into trouble.*

14-year-old project participant

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14-year-old project participant
education in the wider community.

The following interventions have been shown to be effective:

**early years education**
- Access to pre-school education increases attainment in national assessment tests as well as having a positive impact on ‘school commitment’, thereby reducing the risk of disaffection and delinquency during schooling in later years
- The integration of family support with education (SO3: 12), as in the developing children’s centres programme, and in full-service extended schools
- Access to high quality educational provision in early years, which will typically include small numbers of pupils, a balanced curriculum and well-trained staff.

**consistently high standards of teaching and learning**
- A range of educational interventions to promote the development of best practice, often by linking schools together as in education action zones and excellence clusters
- Specific initiatives to encourage the recruitment and retention of quality teaching staff aimed at areas of deprivation where this can be problematic
- A whole school approach to being, for example, a ‘specialist school’ in IT (information technology), sports or arts or by becoming a ‘healthy school’. The National Healthy Schools Standard has been shown to contribute to school achievement and other social outcomes: an accredited local healthy school partnership can be the delivery agent for a range of interventions
- Programmes of learning in schools, which offer more variety and flexibility for individual pupils, particularly at Key Stage 4, such as 14-16 vocational GCSEs or the flexibility to mix work experience, academic study and community learning within the proposed 14-19 curriculum strategy.

**Case study 11**

**Junior Youth Inclusion Project**

Suffolk County Council’s Extended Schools Western Area team has successfully piloted a Junior Youth Inclusion Project for Mid-Suffolk in partnership with the Youth Offending Service. The project targets youngsters between the ages of eight and 13 who are in danger of being excluded from school, and aims to prevent and reduce their involvement in youth crime and anti-social behaviour. Parents are also offered support in dealing with their children.

The project provides a structured programme of activities through the summer holiday and one or two evenings a week during term time. These include art, drama and music workshops, games, sports, movie-making, play sessions and visits to attractions such as Colchester Zoo and Thorpe Woodlands.

One of the project’s opening events was a street art competition in Stowmarket Town Square which was attended by the young people, their families, council dignitaries and education personnel.
Chapter 3 – Effective interventions

support for times of transition, primary to secondary and post-16

- Programmes tailored to support the transition phase and to maintain levels of achievement (SO3: 2, 3, 8) are already established: extra-reading support, programmes to improve social skills and tackle risky behaviour, additional curriculum support after transition as in the Key Stage 3 improvement programme, individual mentors or personal advisors as provided by the Connexions Service.

the integration of disadvantaged pupils and those at risk of exclusion

- Access for all pupils to full-time education that takes account of their particular needs, including pupils with physical impairments, learning and multiple disabilities, those liable to exclusion; those from BME backgrounds, those from Gypsy and Traveller families (SO3: 6), those with English as a second language, including those who have experienced trauma as refugees and asylum seekers and separation from their own parents (SO3: 5)

- Specific intervention projects when pupils fall behind, for whatever reason, to accelerate their educational achievement. These include behaviour programmes and support around attendance such as the Behaviour Improvement Programme. Connexions offers a youth support service for 13 – 19-year-olds, which integrates support programmes for young people including those who are linked to the Youth Offending Team (YOT) or Social Services.

opportunities for informal education and education in the wider community

- A range of youth work activities, such as arts and sports, to re-engage young people who have become socially excluded as well as providing diversionary work for those who are at risk

- Activities which develop confidence and social skills as well as challenging risky behaviour. These may be linked to volunteering or active citizenship and may provide opportunities to gain accredited qualifications in informal and community settings when young people have become excluded from mainstream opportunities. Examples of this are the Youth Inclusion and Support Panel (YISP) programmes developed by YOTs and the Neighbourhood Support Fund programme, operating in community settings, with success at re-engaging young people in education and employment, or providing learning in informal settings for young parents

- Multi-agency approaches for referral and support for children and young people, which strengthen the effect of this work, and initiatives which link more formal statutory services with their communities, such as full-service extended schools

- Flexible approaches to address the challenge of delivering learning to mobile pupils including Gypsies and Travellers and those who miss schooling for significant periods, such as those with chronic illnesses.
Regional Social Strategy – the strategy to achieve social inclusion throughout the East of England

ii) Child poverty

Jobcentre Plus’ New Deal Lone Parent Advisors have contributed to a reduction in lone parents claiming Income Support in the East of England. (SO3: 1) Since 2000 the number of lone parent claimants has fallen by over 9,000 to under 55,000.

Childcare remains a key issue for all parents returning to work or training. To increase the take-up of formal childcare and introduce more parents to children’s centres, Jobcentre Plus has introduced childcare partnership managers, who are raising awareness of local provision and increasing access to Jobcentre Plus services from children’s centres.

One such childcare partnership manager in Norfolk reports that ‘many parents find it daunting to access our services in the formal environment of our offices. The Government’s aspiration to provide a children’s centre in every community by 2010 has enabled us to engage positively with our customers in a more informal and child-friendly environment.’

iii) Parenting

Parenting is a key element of the new Department for Children, Schools and Families’ strategy for addressing disadvantage and exclusion. As a precursor to this, in October 2006 the Government published parenting support guidance for local authorities in England, in which they were asked to:

- develop a strategic and ‘joined up’ approach to the design and delivery of parenting support services, ideally through a parenting support strategy (SO3: 7)
- view support for parents as a continuum, from early intervention and preventative services through to the use of enforcement measures

Case study 12

The Speak Out project

For young Travellers, racist bullying, fear of racist bullying and a conviction that nothing will be done to counter it when it occurs are serious barriers to access and retention in schools. After consultation with young Travellers, 68% of whom stated they had experienced racism or prejudice, Cambridgeshire’s Race Equality and Diversity Service set up the Speak Out project.

Speak Out has helped to raise awareness of this issue and has enabled parents, young people, school staff and other professionals to work together to explore solutions. The project has also produced a CD, Atch Poggering Mande (Stop Bullying Me)*, with young people, their families and schools that can be used at local and national level to illustrate issues of racism and strategies for challenging and tackling it.

One of the many positive outcomes of the project is that Traveller parents and their families have reported feeling more valued, which in turn has had a positive impact on children’s learning.

* Copies of the CD can be requested from: Team for Traveller Education, Cambridge Professional Development Centre, Foster Road, Trumpington, Cambridge, CB2 2NL, Tel. (01223) 508 700.
Chapter 3 – Effective interventions

- identify a single commissioner of parenting support services and commission parenting support services that are evidence based and draw on relevant guidance.

In early 2007 the Government announced an additional £7.5 million to support local authorities to develop and implement local parenting support strategies. At a regional level, the Government Office parent support lead is now working with local authorities to take forward the parenting support agenda.

Some recent parenting support developments include:

- a Commissioner’s Toolkit developed for single commissioners of parenting support in local authorities and others in similar roles across England. This is a searchable database of information on the most effective and replicable parenting programmes. For more information visit www.toolkit.parentinguk.org

- transition information sessions (TIS) (SO3: 8) providing information and advice for parents at key transition points in their children’s lives. TIS are for all parents of the new intake of pupils joining a school, usually in Reception or Year 7. They also form part of the core parenting support offer in extended schools and can cover a number of topics, including school-based issues, healthy eating, bullying and substance misuse. For more information visit www.teachernet.gov.uk/transition

- a two-year pilot in Cambridgeshire and other areas around the country to provide parent support advisors (PSAs). PSAs will have a preventative school-based role to support parents, particularly around their children’s behaviour and attendance

- family intervention projects piloted in Southend and Ipswich and other parts of the country. These involve intensive tailored action with supervision and clear sanctions to improve the behaviour of persistently anti-social households.

vi) Health

The potentially devastating impact of life-threatening or life-limiting illnesses on children and their families can be ameliorated by holistic, family-centred care in hospices, the family home and other settings (SO3:10).

Case study 13

East Anglia Children’s Hospices (EACH)

EACH offer a range of services to support children and young people with life-threatening and life-limiting conditions and their families. An individual care plan is written for every child, in agreement with their parents. This is then put into action by a multi-disciplinary team, liaising closely with each other and with other professionals involved in supporting the family to ensure continuity of care and that all needs are met, whether physical, emotional, social or spiritual.

EACH acknowledges that the family are the experts in their child’s care and are guided by their knowledge, endeavouring to continue their chosen pattern of care. Families can use either hospice or community care options, the latter providing a family support service and a community palliative care service. For more information visit www.each.org.uk.
3.1 – SO4: To improve the life chances of adults through learning and skills development

There are many adults in the region with literacy, language, ESOL (SO4: 2) and numeracy (SO4: 1) needs that prevent them from getting jobs, progressing at work, helping their children learn and being active in their local communities.

i) Skills for Life

Skills for Life (SfL), the national strategy for improving adult literacy, language and numeracy skills, was launched in 2001 and aims to improve the basic skills of 2.25 million adults between 2001 and 2010, with a milestone of 1.5 million by 2007.

The focus of SfL is broad, covering literacy, numeracy and ESOL provision for adults ranging from pre-entry to Level 2 (see Framework of National Standards for Literacy and Numeracy, page 29).

The Learning and Skills Council (LSC) is committed to reducing the number of adults and young people in the region with skills gaps and needs and increasing the number with SfL qualifications. The LSC’s *East of England Skills for Life Strategy* (2007) states that all learners in the East of England should be entitled to:

- access to initial and diagnostic assessment
- an individual learning plan setting out learning aims, goals and the smaller steps that the learner will take in order to achieve their goals
- flexible programmes to meet their individual learning needs
- teachers who give regular, constructive and recorded feedback and who are able to use a range of teaching approaches
- opportunities to take recognised national qualifications at the appropriate level
- guidance to help plan progression into other learning, training and employment opportunities.

The strategy also states that all SfL programmes in the region should seek to:

- offer a positive learning experience for learners
- extend the reach of SfL to new audiences
- provide support to learners to improve completion and achievement rates across a range of programmes
- boost the confidence of learners to take up progression opportunities
- increase the number of individuals accessing and achieving national qualifications
- increase the achievement and completion rates of all learners on all types of programmes
- promote links to other learning and employment opportunities.

National performance

Between 2001 and October 2006, 1.6 million learners achieved at least one qualification that counted towards the targets and 4.7 million learners took up 10.4 million learning opportunities.
Regional performance
In the East of England since 2001, 424,246 SfL learners have taken up 818,724 learning opportunities resulting in 131,074 people gaining qualifications that count towards the national target. By July 2006 the LSC had achieved 79% of its regional 2007 milestone for the target to improve basic skills.

Case study 14

Inspiring Skills for Life learners
Museums, Libraries and Archives East of England developed the All Aboard! programme to explore how museums, libraries and archives and Skills for Life providers could work in partnership to benefit learners. Six pilot projects, addressing either literacy, ESOL or numeracy, took place around the region in areas of skills need such as Great Yarmouth, Lowestoft and Luton.

Projects included partnerships with further education colleges and family learning initiatives. They focused on developing activities at a museum, library or archive that would embed Skills for Life learning. These included using the People’s Network of Computers, specially selected book collections, object handling sessions, research into local history and family numeracy trails.

The projects enabled many learners to experience museum, library and archive services for the first time. An evaluation showed that learners and tutors felt motivated and inspired and that the understanding of concepts was enhanced by applying them to real-life contexts. Many students talked about continuing their studies and sharing their learning experiences with families.

Case study 15

Embedded Skills for Life support
West Suffolk College provides Skills for Life courses in adult literacy, numeracy and IT which address some of the social and educational issues surrounding learning and personal development. Vocational tutors offer embedded Skills for Life support, either in class or at other arranged times. This might be in college or in a community setting such as work-based learning.

ii) The East of England Skills and Competitiveness Partnership (EESCP)

EESCP was established in September 2005 to lead a step-change in the region’s skills base by better co-ordinating resources and activity between a range of delivery partners. As a working partnership EESCP brings together the people, businesses and investment needed to achieve world-class skills, jobs and growth in line with the East of England Regional Economic Strategy. EESCP’s Framework for Action 2006-2009 sets out the partnership’s four strategic goals:

1. strengthen the East of England’s business base (SO4: 3, 4, 5, 6)
2. develop a culture of lifelong learning (to include developing the skills base of disadvantaged groups) (SO4: 1, 2, 3, 4, 5, 7, 8)
3. create opportunities for disadvantaged groups and communities (SO4: 5, 7, 8) (by targeting efforts on disadvantaged localities and groups where the employment rate is low, including people with disabilities and longer-term illnesses, lone parents, Black and minority ethnic groups and older adults)

4. invest in sustainable economic growth (SO4: 4, 5, 6) (to include investing in disadvantaged communities).

These goals will be achieved largely through six core work programmes:

1. implementing Sector Skills Agreements
   EESCP will work with sector skills councils to implement all approved regional sector skills agreements (SSAs). The construction SSA is already in place and being used as a pilot.

2. delivering Train to Gain
   Train to Gain is a programme to help businesses get the advice about the quality training and funding needed to boost productivity. This can include free training to help low skilled employees gain their first full Level 2 qualification and first Skills for Life numeracy and literacy qualification. In the East of England EESCP has played a key role in the design and development of Train to Gain and will help to co-ordinate delivery of the service.

3. improved 16-19 progression
   Progression from Level 2 qualifications at age 16 to Level 3 qualifications at age 19 is well below that of other regions, leading to low participation rates in further education (FE) and higher education (HE). EESCP is working towards improved access to impartial advice and guidance, demonstrable improvements in participation and achievement rates for disadvantaged groups and increased FE and HE participation and learning.

4. implementing the regional business support strategy
   EESCP has steered the development of the Better for Business regional business support strategy, which will provide a more coherent, integrated and accessible range of services to the region’s business community. Among its priorities, the strategy has recognised the need to provide adequate support for under-represented groups who could potentially become more entrepreneurial.

5. supporting local area agreements
   EESCP has identified that the ‘economic development and enterprise’ theme of LAAs provides an opportunity for regional and local partners to align funding and deliver to improve skills, education, employment and competitiveness against agreed objectives. The partnership will work towards encouraging local partners to reflect EESCP priorities for improving skills, education, employment and competitiveness within their LAAs (SO4: 6) and identifying an LAA pilot to test how EESCP and local partners can work together effectively to achieve the best results at a local level.

6. a compelling higher education offer
   On the basis of places per capita, the East of England has the lowest higher education provision in the country. In response, the region has embarked on a major HE capital expansion programme, particularly to increase HE provision in parts of the region where participation is low. University Campus Suffolk is the most advanced example to date with developments and plans being progressed at Southend, Peterborough, Thurrock, Harlow/Stansted and Bedford.
Chapter 3 – Effective interventions

3.1 – SO5: To promote active ageing and reduce social exclusion of older people

‘Active ageing’ is a concept championed by the World Health Organisation, as the central theme of a policy framework to promote healthy and active lives. It is defined as ‘the process of optimising opportunities for health participation and security in order to enhance quality of life as people age.’

This can include participation of older people in social, economic, cultural, spiritual and civic affairs (SO5: 1), as well as the ability to be physically active and to participate in the labour force (SO1: 4 and SO2: 6).

While not all older people will experience social exclusion, some of its causes can also be a barrier to active ageing, such as difficulties in accessing services, including transport.

i) Housing and health

Making the links between housing, health and social care is crucial to ensuring holistic service provision for those older people most vulnerable to social exclusion. Housing specifically designed to meet the needs of older people may enable them to live independently for longer. The Regional Housing Strategy for the East of England: 2005-2010 (EERA, 2005) recommends an increase in the availability of Home Improvement Agency (HIA) services across the region (SO6: 3). HIAs assist vulnerable homeowners or private sector tenants who are older, disabled or on low income to repair, improve, maintain or adapt their homes. By improving people’s living conditions their quality of life is enhanced and they are able to remain in their homes in greater comfort and security.

Case study 16

Dining with a Difference

EESCP recently hosted Dining with a Difference, a special dinner event to celebrate and raise awareness of the benefits of employing disabled people.

The event provided a leading disability consultancy with the opportunity to take employers through a four course meal, highlighting at each course how disability affects their employees, their customers and clients and the communities in which they do business. Diners were encouraged to share personal experiences and views and consider in practical terms what needs to be done if their companies are to build on their achievements.

Anne McGuire, Minister for Disabled People, who attended the event, said

Dining with a Difference has enabled employers to take the time out and explore the positive benefits of being a ‘disability confident’ organisation. If employers take on the role of championing disability issues it will go a long way to help address barriers that disabled people face within the labour market.

Anne McGuire also spoke about the changing demographics in the region and the convincing case for the business benefits a flexible approach to workforce diversity brings.

Comments from guests included:

I was genuinely moved and educated. The scale of the needs and indeed the value of economic inclusion of this ‘forgotten’ section of work-capable society was brought to our attention in a delicate yet forceful way.
Research has suggested a number of other ways in which housing policy can help to minimise the effects of social exclusion (The Implications of an Ageing Population for the Sustainable Development of the East of England, Population Ageing Associates, 2003):

- use of demographic information in the planning of public and private housing and associated infrastructure
- as identified in the Sustainable Communities Plan, ensuring an inclusive approach to the planning of growth areas that takes account of the needs of older people as well as other disadvantaged groups in need of affordable housing (SO6: 2)
- Lifetime Homes incorporating design principles that enable people to remain in their home following a change in circumstances such as developing a disability
- Smart Homes with technological measures to prevent falls and other accidents, assisting older people to stay in their homes as long as they wish.
Chapter 3 – Effective interventions

With regard to housing conditions, the UK Fuel Poverty Strategy together with winter fuel payments and other energy efficiency measures aim to end fuel poverty among the elderly by 2010 (UK Fuel Poverty Strategy, 4th Annual Progress Report, 2006).

Case study 17

Home Shield Suffolk

This is a service provided by a partnership of organisations who work together to provide for all the unmet needs of vulnerable older people who are visited in their homes by a person from one of the partnership organisations. Simple and cheap to run, the only significant cost is that of providing a co-ordinator.

Vulnerable older people benefit greatly from this integrated service. For example, if a client was visited by the Pension Service to help them claim for Attendance Allowance, the visitor might notice that the client’s front door is not secure, or that there is no smoke detector or that the client has not seen anyone for weeks. One referral through Home Shield will put other relevant organisations in touch with the client, so they can benefit from services such as Key Safe from the local Handy Van scheme, ten-year smoke alarms from the Fire Service and befriending through Age Concern.

Case study 18

Supported housing for older people

Built in partnership with Hertfordshire County Council and Welwyn Garden City Housing Association, Swan Field Court is a fully self-contained purpose-built supported housing scheme for older people with mild to moderate dementia.

Located in the grounds of the Queen Victoria Memorial Hospital, the building contains ten flats. Eight are one-bedroom and two are two-bedroom properties, suitable for couples or a single person living with a carer. Every resident referred to the unit had been occupying an acute or community hospital bed. This is the first unit of its kind in Hertfordshire.
Regional Social Strategy – the strategy to achieve social inclusion throughout the East of England

The Government has set out a series of National Service Frameworks intended to drive up standards in health and social services. The National Service Framework for Older People was established in 2001 and aims to improve services for older people by focusing on:

- rooting out age discrimination (SO5: 2)
- providing person-centred care
- promoting older people’s health and independence (SO5: 4)
- fitting services around people’s needs (SO5: 1).

The Social Services Inspectorate has since identified the need for further work by Social Services departments to address the gaps in provision for certain groups such as older people with mental health difficulties, visual and other sensory impairments and older people from ethnic minorities (*Health Inequalities: a programme for action*, Department of Health, 2003).

Many local authorities operate ‘passport to leisure’ schemes or offer concessionary rates for older people wanting to remain active. There are also a number of examples around the region of sports centres working in partnership with local primary care trusts (PCTs) and other health agencies to offer a range of sports and recreational facilities (SO5: 4).

ii) Income

Given the increased risk of poverty for those people who stop working before state retirement age, there is a general policy shift towards *promoting the participation of older people in the labour market* (SO2: 6).

The Government has proposed making later retirement more financially attractive by increasing the public sector retirement age and giving employers greater flexibility in determining retirement age. Other organisations such as PRIME are working to help over-50s to set up in business.

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**Case study 19**

**Warmer homes for older people**

Western Suffolk Local Strategic Partnership is in the process of developing a targeted referral system for vulnerable older people who are suffering from fuel poverty.

The project will provide a single referral point to access help through the Government’s Warm Front scheme, ultimately aiming to alleviate fuel poverty. Home visitors, including those who refer through Home Shield (Case Study 17 above), will be trained to recognise fuel poverty and to advise on help which is available.

A similar scheme has been set up by Luton Borough Council and partners and is underpinned by the Borough’s Affordable Warmth Strategy. Building on the success of this project, Luton Borough Council now advises other local authorities on setting up affordable warmth schemes and is a member of the Government’s Fuel Poverty Advisory Group. The importance of the project has been acknowledged by the fact that Luton’s local area agreement now contains three targets relating to affordable warmth.
To successfully include older people in the labour market, employers and policy makers must consider offering jobs which are geared to the circumstances, needs and financial objectives of the over 50s. It is essential to have opportunities for career change including advice, re-training and re-skilling, both for those already in employment and those wishing to return.

Appropriate advice at the right time is also key to helping people make the right decisions about their finances as they get older. For women in particular, advice needs to take into account the patterns of their lives, such as the fact that more women are in part-time work and may not be members of their employer’s pension scheme.

The current pension system is complex, with means testing used to identify those entitled to additional support. Credits are available where individuals have not been able to make pension contributions through paid employment. Age Concern has called for the reform of the pensions system so that all contributions, no matter how small (including those who choose caring over their career) are rewarded.

As far as older people from Black and minority ethnic communities are concerned, research suggests a variety of measures can help overcome the barriers to claiming benefits to which they are entitled (Delivering Benefits & Services for Black and Minority Ethnic Older People, Barnard & Pettigrew, London, DWP, 2003):

- a specific strategy for benefits services aimed at understanding individual communities
- partnership working between the Government, local authority and voluntary and community sector
- outreach and face-to-face service provision
- language-specific helplines and use of community specific media
- voluntary sector resourcing
- measures to reach isolated older people.

iii) Communities

Voluntary and community work offers a range of opportunities for older people to develop both their skills and wider social networks. People who stop work before the state retirement age and do not find alternative employment are particularly vulnerable to social exclusion. Yet, in general, they are not replacing paid work with community activities despite the benefits that may be derived in respect of personal confidence, social contact and learning new skills. Several interventions have been suggested to increase community involvement amongst older people (Winning the Generation Game, PIU, 2000):

- diversity and flexibility in employment, including reducing hours in the last years of employment, which will also create time for volunteering (SO5: 3)
- introduction of national and regional schemes for volunteering (SO6: 12), offering more attractive opportunities to put their experience to good use, for example through mentoring and befriending
- introduction of pilot schemes to recognise and reward volunteering activity, including through small stipends and in-kind benefits
Case study 20

St Margaret’s Befrienders

Gill Jackson successfully applied for a Community Champions Fund Award to set up St Margaret’s Befrienders, following her experience of befriending an elderly person in her community over a nine-year period.

During this time the elderly person befriended by Gill moved from sheltered accommodation to a residential home and latterly to a nursing home. This gave Gill an insight into the various institutions and services available for elderly people and highlighted the need for befriending schemes.

St Margaret’s Befrienders has now been running for over two years and currently provides volunteers to visit 15 housebound elderly people, most of whom have few other visitors and may not have left their homes for many weeks. In addition, they have also extended a ‘listening ear’ to up to 30 other elderly people, some of whom may need regular visitors in the future, but who are more mobile at present. For these people they run coffee mornings, providing transport and refreshments.

However, it is not just the elderly people who are visited that benefit from the scheme. As Gill says:

_The unexpected benefit has been the confidence volunteers gain from their role, many of whom have not been employed for some years._
Case study 21

Social activities for older people

In partnership with Age Concern Hertfordshire and Adult Care Services, Welwyn Hatfield District Council has set up an Asian Elders Lunch Club.

By providing free door-to-door transport the club enables older Asian residents to meet once a week, enjoy a meal together and get support from an Asian community worker. Members of the group are able to join in with activities and socialise with other service users.

Another partnership between the council and Age Concern provides computer training to older people and the facilities for them to use the internet in a purpose-built computer suite in a local community centre.

The council also runs a popular Shopper Hopper scheme which helps older people who find using public transport difficult remain independent by taking them to the local supermarket once a week and providing help with carrying the bags of shopping to the front door. Wheelchair accessible buses take people from the surrounding villages to the main towns and the trip becomes a social occasion as well as a means of stocking up on essentials. This service has recently been extended to include support for older people to visit relatives in local hospitals.
3.1 – SO6: To support the development of sustainable communities

i) Housing

While housing policy can both trigger and reinforce social exclusion, it can also make a significant contribution to creating mixed, sustainable communities (SO6: 1). The following themes provide the policy focus for achieving long-term change:

- increasing supply to provide quality, affordable homes for those in need
- promoting, mixed sustainable communities
- supporting residents, tenants and the community.

The Government’s long-term programme for delivering sustainable communities – places where people want to live and work, now and in the future - is set out in the Sustainable Communities Plan (2003). This identifies four growth areas, three of which are wholly or partly in the East of England. The aim of these is sustainably to provide 200,000 additional homes above previously planned levels by 2016.

The three main themes of the current Regional Housing Strategy (2005-2010) reflect housing’s central role in promoting sustainable communities: more, sustainable housing provision; high, quality homes and environments; creating inclusive communities.

EERA’s Housing & Sustainable Communities Panel performs the functions of the Regional Housing Board and has recently submitted to Government the East of England Housing Investment Plan 2008-11. This sets out EERA’s recommendations to ministers on how to allocate housing capital investment in the region during 2008-11. The plan’s recommendations were informed by the Regional Housing Strategy and advice received from the housing sub-regions.

Increasing supply to provide quality, affordable homes for those in need

The region’s highest priority is the provision of new, affordable housing (SO6: 2), reflected in the allocation of 85% of housing capital investment during 2006-08. Yet, the funding will deliver half the identified need of 11,000 new, affordable homes per year. In recognition of the region’s acute housing stress, EERA has recommended to Government that the bulk of the housing investment during 2008-11 is again allocated to the provision of new, affordable housing, and for new and refurbished pitches for Gypsies and Travellers (SO6: 5).

Maximising the use of existing stock also helps to increase supply. For example, by bringing back into use empty homes and investment in the private rented sector stock. EERA has recommended that 5.17% of housing capital investment during 2008-11 is targeted at achieving and maintaining the Government’s PSA7 target that by 2010 at least 70% of vulnerable households in the private sector have decent homes. It proposes to establish a fund to support interventions at a regional scale, drawing on the advice of the region’s Private Sector Working Group and national and regional good practice. The advantage of such an approach is the option of integrating other funding streams such as DEFRA’s (Department for Environment, Food and Rural Affairs) Warm Front. It is also proposed to explore loan/equity release schemes that enable the ‘recycling’ of funds as well as to target a proportion of the funding in response to sub-regional bids, with a strong emphasis on the Decent Homes agenda. The region is on target to meet the Decent Homes standard in public sector housing stock by 2010, with all stock-holding local authorities having completed appraisals in 2005 demonstrating how the standard would be met.
The most effective means of tackling homelessness is to strengthen prevention measures and increase housing supply (SO6: 4). The Homelessness Act 2002 strengthened rights for homeless households and placed increased duties on local authorities, including the duty to develop a homelessness strategy. The purpose of such strategies is to prevent homelessness and ensure that accommodation and support is available for people who are homeless or at risk of homelessness. Building on the development of more mature sub-regional housing structures and relationships, a number of sub-regions are exploring the option of developing sub-regional homelessness strategies.

Recent research (Homelessness Statistics June 2007 and Local Authority Survey of Homelessness Prevention – Policy Briefing 19, Communities and Local Government, 2007) reflects the shift in emphasis towards prevention of homelessness. The five most successful prevention measures (in order) were rent deposit schemes, mediation, advice on housing options, dialogue with landlords and home visiting. The top three reported by local authorities in the East of England mirrored the national picture (rent deposit 60%; advice on housing options 40%; home visits 29%).

The Regional Homelessness Advisory Panel (RHAP) was established in July 2006 with the aim of providing a regional focus for homelessness issues, including effective regional communication and co-ordination across agencies and strategies and the sharing of good practice. The RHAP is one of a number of task groups that support implementation and delivery of the Regional Housing Strategy and is expected to play an important role in contributing to the evidence base for the next Regional Housing Strategy to be published in 2010.

Promoting mixed sustainable communities

Nationally, two-thirds of social housing is still located within areas originally built as council estates (Ends and Means: The future roles of social housing in England, Hills, ESRC Research Centre for Analysis of Social Exclusion, 2007). Over the past ten years social landlords have introduced a range of initiatives to promote mixed tenure on both new and existing developments to support increased household mix and reduced stigmatisation – the key to long-term sustainability. The recently published Planning Policy Statement 3, Housing (2006) provides the planning framework for achieving these objectives. Specific outcomes include a mix of affordable and open market housing, particularly in terms of tenure and price to support a wide variety of households in both urban and rural areas, and housing developments in suitable locations, which offer a good range of community facilities and with good access to jobs, key services and infrastructure.

A feature of the housing market in recent years has been the growth of the ‘intermediate housing market’ which reflects the growing affordability problem. In 2005 the Government’s five-year sustainable communities plan, Homes for All, established HomeBuy, a low cost home ownership programme aimed at people on lower incomes who cannot afford to buy without this support. It builds on and incorporates the Key Worker Living Programme which was launched in 2004 and targeted public sector key workers such as teachers and nurses.

The Government is currently supporting a number of mixed communities demonstration projects that build on the learning from programmes such as the New Deal for Communities and aim to tackle the three main drivers of area deprivation: a weak economic base, poor housing and local environment and poorly performing public services. EERA has recommended that a proportion of housing investment during 2008-11 is allocated to support innovative projects that contribute to the promotion of mixed, sustainable communities, drawing on the learning and good practice emerging from the demonstration projects.
Regional Social Strategy – the strategy to achieve social inclusion throughout the East of England

Case study 22

Re-development of the former De Havilland airfield

The re-development by a multi-agency partnership of the De Havilland airfield in Hertfordshire won an award for excellence in delivering mixed communities.

The project, which is the largest brownfield development in the county, has now attracted a number of multi-national and local businesses, together with proposals for 2,200 homes. Of these, approximately a third will be available for rent and low cost ownership.

The project partners have also contributed towards a community development fund which has supported a number of initiatives, including a very popular tree-planting day which saw the local community take ownership of 100 trees and 300 metres of hedging. Funding has also been secured for a full-time sustainable communities worker, who has been instrumental in helping to set up a thriving local residents’ association.

A new community school and community hall are currently under construction and the project partners have commissioned jointly with residents three major pieces of public art to celebrate the development and create a sense of place for the newly forming community.

Promoting independence and housing choice, particularly for vulnerable groups, can prevent or delay the need for costly intensive services as well as improve the quality of life and engagement with the community. The design of homes is vital to promoting good health and wellbeing for all age groups but particularly in enabling older people to live independently. It has been calculated (www.jrf.org.uk/housingandcare/lifetimehomes, JRF, 2007) that building Lifetime Homes could save the country over £5 billion over sixty years. The idea is simple: build a house that suits people at different stages in their life, thereby reducing the number of costly adaptations to general needs housing and the need for people to move to residential care. Lifetime Homes are included in the new Code for Sustainable Homes (2006). All new, affordable housing delivered through the Housing Corporation’s National Affordable Housing Programme must meet Level 3 of the Code from April 2008.

To reflect the region’s higher than average proportion of the population living in rural locations, and a greater than average rural population growth rate, EERA has recommended that a minimum of 1,000 affordable homes are delivered in rural areas during 2008-11. 75% will be focused in settlements of below 3,000 population and 25% will be focused in settlements from 3,001 to 10,000 population.

In contrast to traditional housing allocation systems, choice-based lettings (CBL) schemes enable housing applicants to choose between and apply for available to-let properties. The shift in emphasis towards a customer-led service is supported by the Government’s 2010 target for all local authorities to have introduced CBL schemes. The region is making good progress towards achieving the target, with most local authorities choosing to adopt a sub-regional approach towards implementing schemes.

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Chapter 3 – Effective interventions

Case study 23

Addressing rural homelessness

Homelessness is often considered primarily an urban phenomenon because homeless people are greater in number and more visible in urban areas, but homelessness is also pervasive in rural areas.

Increases in house prices in some remoter areas have made fewer homes affordable for local families. The consequence of not providing affordable housing in these rural areas means they will increasingly become places where only the rich can afford to live and young families, the elderly and young people on moderate incomes find themselves priced out of their local community.

In order to address the issue of rural homelessness Maldon District Council has secured funding to work more closely with the Rural Community Council of Essex who work with rural communities to assess housing needs at parish level. Through this partnership Maldon District Council aims to identify need through community participation and village appraisals and address the lack of accommodation through small developments of affordable homes for local people.

Supporting residents, tenants and the community

Statutory and non-statutory supported housing services are key elements in thriving and sustainable communities. Adequate support for vulnerable members of society can prevent chaotic lifestyles, anti-social behaviour and criminality.

The supported housing sector provides an important safety net for individuals (SO6: 6). The sector has a proven track record in delivering high quality outputs, outcomes and value for money. Evidence also shows that increased supported housing investment has a critical role to play in achieving progress across a broad range of government aims, objectives and targets. Notwithstanding planned increases in affordable housing, the most vulnerable in society will continue to require supported housing provision.

The Supporting People programme was set up in 2003 to fund a range of housing-related support services to ensure that some of society’s most vulnerable people receive help to live independently. Funding provides a range of support such as warden services, adaptations to cope with disability, assistance for residents such as older people in sheltered housing, vulnerable young people and people with learning difficulties or mental health problems. It also enables the provision of ‘floating support’, which is an important mechanism for breaking the cycle of repeat homelessness by enabling vulnerable individuals to sustain their tenancies.

Supporting People has made an important contribution to the Government’s objectives of promoting equality of opportunity and social inclusion by helping to reduce homelessness, re-offending and enabling older people to remain in their own homes. Future challenges for the programme are highlighted in the National Supporting People Strategy, Independence and Opportunity (June 2007). These are to keep service users at the heart of the programme, to enhance partnership working with the ‘Third’ sector, to deliver the programme within new local government initiatives such as local area agreements, whilst at the same time increasing efficiency and reducing bureaucracy.
The Supporting People East Region Group (SPERG) consists of the ten authorities in the East of England with responsibility for commissioning and procuring support services. Each year more than £120 million is invested in this region ensuring that the most vulnerable are given the assistance they need. SPERG has introduced a regional accreditation process that providers have to pass before they can gain access to funding. The process was set up to ensure a consistent approach to monitoring high quality services across the east.

SPERG will publish a Regional Supporting People Strategy in the autumn of 2007. This document will outline their strategic priorities for 2008-11.
ii) Neighbourhoods and the environment

There is a growing body of evidence that demonstrates the strong links between nature and social well-being. The natural environment where biodiversity thrives is an essential part of the quality of life of local communities and has an important role to play in 'liveability' improvements. There are also opportunities in towns and cities to create habitats through new development, with some innovative schemes showing that biodiversity can be conserved and even enhanced as a consequence of urbanisation and development.

Research suggests that contact with nature makes an important contribution to our mental well-being, such as in reducing stress levels (SO6: 7). The planting of trees and woodlands along roads can help to mitigate some of the effects of air pollution, especially in deprived areas. There is a need to increase levels of visual contact with 'nature' by creating gardens and urban tree planting, for example. These issues are considered in more depth in both the Regional Environment Strategy and Regional Woodland Strategy, which include specific actions relating to the promotion of social inclusion.

With the benefits of diverse greenspace around housing well proven, Natural England has developed the Accessible Natural Greenspace model. This recognises the importance of quality and accessibility in the use of greenspace by local communities (SO6: 8), especially for certain groups such as children, young people, older people and disabled people. The model aims to encourage local planning authorities to ensure that no person need live further than 300m from quality natural greenspace, particularly contributing to the improvement of areas of deprivation which tend to be associated with poorer quality environment. A toolkit has also been developed to assist authorities in assessing the quality and quantity of natural greenspaces in their area and to help them develop a strategy to address deficiencies and maximise opportunities.

Planning and design are important mechanisms for improving community health, quality of life and creating a safe living environment that promotes social capital. The Towns and Cities Strategy highlights a range of innovative approaches to making the region’s towns places where people will want to live, work, play and invest. To support the implementation of the Sustainable Communities Plan in the region, Communities and Local Government and the Department of Health (through the Regional Public Health Group) are working together to explore how the design of the built environment can promote healthy, sustainable communities.

Case study 24

Norfolk Offender Accommodation Forum (NOAF)

NOAF is a multi-agency group of voluntary and statutory organisations that works strategically and operationally to highlight and address the accommodation and housing support needs of offenders in Norfolk. It includes representatives from Norfolk Probation, Norfolk Supporting People, Drug and Alcohol Action Team, Space East, Broadland District Council and Norfolk County Council.

NOAF aims to promote the rehabilitation of offenders, increase public protection, prevent homelessness and reduce levels of re-offending. NOAF has clearly defined terms of reference and plays a vital role in bringing together local agencies and organisations that can promote change, challenge social exclusion and promote inclusion for offenders.

NOAF has recently secured funding through the Norfolk Local Area Agreement for a Strategy Implementation Officer to deliver its challenging multi-agency action plan.
Case study 25

Oakwood Road Community Field

Situated in the heart of the Whitton estate in South Lowestoft, Oakwood Community Field is now a picturesque ‘pocket park’. Until recently, however, it was an under-used open space, surrounded by housing, which had become the subject of anti-social behaviour, and fly tipping.

The local tenants’ association, Neighbourhood Watch and Whitton Life (a local community-based support group) have worked with Waveney District Council and Suffolk Police to transform the area into a welcoming and well-used local amenity.

Community involvement from the outset has been critical to the success of the project, which has been driven by the vision of local people. Children from the local school were involved in the creation of a colourful mosaic, which is the centrepiece of the paved area. Since the project was completed several successful events have been held at the park, including an Easter egg treasure hunt, attended by well over 200 local people.

In recognition of its success Oakwood Road Community Field has won a national award that recognises high quality green spaces that are managed by voluntary and community groups.

Jo McCallum, Community Development Officer at Waveney District Council said:

“This project demonstrates how by working in partnership communities can make a real difference to their local areas, and have the ability to bring about a positive change which will benefit everyone.”

Before

After
Case study 26

The Green Light Trust

The Green Light Trust is a Suffolk-based charity which works by invitation around the country, helping to establish community-owned woodlands.

Community groups are formed in each participating parish or area, and members of the local community take part in planting and other events. Provision often includes links to local schools, disabled access and informative talks about the woods.

With independence and self-sufficiency as goals, the Trust works with both urban and rural communities to find land, design, plant and manage their own woodland. The Trust bases all its work on four thematic cornerstones: children, community spirit, biodiversity and global kinship. It aims to hand on to others the practical experience gained since starting its paradigm project in Suffolk in 1993.

The Trust currently has 33 rural and urban projects in eight counties, 28 of which are in the East of England, with a total of 55.9 hectares planted to date.
As well as benefiting from access to the natural environment, sustainable communities need to take into account their impact on the environment, particularly where this contributes to climate change and its potentially catastrophic consequences. (SO6: 9)

This will involve pursuing such initiatives as low-carbon building, environmentally sensitive waste disposal, re-cycling, water-efficiency, raising awareness of sustainable lifestyle behaviours and ensuring that developments are designed and located to cope with climate-related impacts, such as flooding and increased temperatures.

At the time of writing, the East of England Climate Change Partnership is in the process of developing an action plan to help the region to develop sustainably in a continually changing climate.

Case study 27

The Foundry; an award-winning carbon neutral building

The Foundry is the headquarters of Suffolk-based charity, the Green Light Trust. Completed in 2006, after over 2,445 hours of volunteer help, it was awarded the East Sustainability Award by the Royal Institute of British Architects.

The building was deemed sustainable because of its 'deep green', carbon neutral construction methods. Another factor in achieving the award was the Green Light Trust’s ethos of local volunteer engagement and the use of the project as a training tool for construction workers. The Foundry is as near autonomous as possible, using natural energy systems and creating no waste.

The Foundry is already being used as a local heritage and environmental education centre, promoting issues of sustainability, past and future, and involving local residents with knowledge of the building’s agricultural use and the surrounding land.

The Green Light Trust hosts schools from a 25-mile radius to learn about traditional land management techniques and the contemporary use of traditional materials employed in The Foundry’s re-build. The Foundry is also a place for business people to broaden their understanding of environmental and social responsibility issues and explore how their local actions affect the bigger picture of global sustainable development and climate change.
Chapter 3 – Effective interventions

The Government has also put in place a raft of measures to tackle anti-social behaviour and in *Living Places, Cleaner, Safer, Greener*, sets out its vision for public space (ODPM, 2002). Combining these initiatives with effective housing management brings together the resident, housing and environmental elements, supporting the development of sustainable communities. The agenda to tackle anti-social behaviour has been further strengthened with the launch in 2005 of the cross-governmental Respect Task Force. This group works closely with local areas to develop policy and ensure that the Respect programme is delivered successfully across the country. Key measures of the Respect programme include:

- a new approach to tackling problem families through intensive family intervention programmes
- a wide-ranging programme to address poor parenting
- strengthening communities through more responsive public services
- improving behaviour and attendance in schools
- the funding of constructive activities for young people, such as youth intervention projects and sports programmes.

Speed restrictions in areas of high pedestrian activity have been shown to help prevent road traffic deaths and injuries. The National Institute for Health and Clinical Excellence is working with local authorities to support the implementation of 20mph zones in disadvantaged areas to reduce the disproportionate toll of road injuries suffered by these communities. Policy initiatives to cut down on car use include the Government’s action plan for ‘reducing car use on the school run’, which aims to help reduce congestion and the associated slowing down of buses and increased car noise and pollution, and also to contribute to children’s activity levels and reduce traffic accidents.

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**Case study 28**

**The Choose2Reuse campaign**

In January 2007 Cambridge Community Reuse and Recycle Network launched the Choose2Reuse campaign, inviting members of the public to donate unwanted, duplicate or replacement gifts to a ‘Green Santa’, for distribution to charity shops and furniture projects. As well as promoting the environmental benefits of recycling, the aim was to provide a source of good quality affordable gifts for retail at a time of year which can be particularly isolating for those with limited financial means.

A regional media campaign and roadshow generated an overwhelming response, both in terms of items donated and the sheer enthusiasm and diversity of those who volunteered to run the campaign. A spin-off benefit for many of these volunteers was the work experience and confidence they developed during the campaign, in some cases leading to permanent employment within furniture projects and elsewhere.

As well as receiving goods for resale, the campaign also produced and distributed pledge cards which resulted in 1,500 additional offers of donations. Most local authorities who took part in the campaign have continued to produce and promote the pledge cards in their areas.
iii) Cultural opportunities

The importance of cultural opportunities in creating sustainable communities is recognised in the Joint Agreement on Culture and Sustainable Communities between the chief executives of the five leading national cultural agencies and the Department for Culture, Media and Sport, and Communities and Local Government, which was signed in July 2006. At the time of writing a Regional Action Plan to support the Joint Agreement is being developed.

iv) Crime

The Government places partnership working at the heart of tackling crime and disorder and the misuse of drugs (SO6: 10). The 1998 Crime and Disorder Act established Crime and Disorder Reduction Partnerships which draw membership from the police, local authorities, Probation Service, PCTs, the voluntary sector and local residents and businesses. This multi-agency membership enables crime to be placed within the context of the broader social exclusion agenda. While the work of the 48 partnerships around the region is focused primarily on crime reduction, it impacts on many other areas.

Similarly, each of the agencies represented have committed themselves to aligning strategies. For example, many local Health Improvement Plans include a section that outlines the PCT’s contribution to the crime agenda and the clear links between their work and the impact they can have in reducing crime. Indeed the Police Reform Act 2002 reinforces this point by making PCTs responsible authorities.

As far as drugs misuse is concerned, the Home Office’s Drug Strategy has nationally proved very successful. The strategy is underpinned by three main targets:

- reduce the harm caused by illegal drugs, including substantially increasing the number of drug-misusing offenders entering treatment through the criminal justice system
- reduce the use of Class A drugs and the frequent use of any illicit drug by all young people under the age of 25, especially the most vulnerable
- increase the numbers of problematic drug users in treatment by 100% by 2008, and increase year-on-year the proportion of users successfully sustaining or completing treatment.

As a result of the Drug Strategy, in 2004 there were 54% more drug users in treatment than in 1998, and the launch of an anonymous interactive drugs information portal (Talk to Frank) has been extremely successful nationwide, with 3.5 million website visits, and 675,000 phone calls between May 2003 and December 2004. In addition to this, drug-related crime has fallen, and in 2004/5 was a fifth lower than in 2002/3.
v) Health

In recent years national health policies have recognised the need to improve social inclusion to improve the overall health of the population.

Choosing Health

The public health white paper Choosing Health, which was launched in November 2004, recommends that health improvement and tackling inequalities should become integral to NHS mainstream planning and delivery of services. There is a particular emphasis on health inequalities and mental health issues including the mental health of children, older people and Black and ethnic minorities.

The Choosing Health delivery plan highlights how the Department of Health and the NHS with other partners, within the framework of government policies, will help more people make more healthy choices and reduce health inequalities. It outlines the priorities for delivery at national, regional and local levels and how these will be achieved.

Our Health, Our Care, Our Say: a new direction for community services

The white paper Our Health, Our Care, Our Say: a new direction for community services, published in January 2006, sets a new direction for the health and social care system. It confirms the vision set out in the Department of Health green paper, Independence, Well-being and Choice and proposes a shift in the way in which services are delivered, ensuring that they are more personalised and that they fit into people's busy lives. The white paper aims to achieve four main goals:

- better prevention services with earlier intervention
- people to have more choice and a louder voice
- more to be done to tackle inequalities and improve access to community services
- more support for people with long-term needs.

Case study 29

Bobbies on the Beat

The Bedfordshire Police Partnership Trust, a charity which works with the North Bedfordshire Community Safety Partnership, has been operating a Bobby Scheme since 1997 to support elderly and vulnerable victims of repeat crime.

The scheme has targeted five areas which are among the most deprived in the borough in terms of low income, poor education, skills and training, barriers to housing services and child poverty.

As well as providing general crime reduction advice and reassurance, the scheme offers a free service which includes a home security survey and installation of security equipment.

Since its launch, in cases where the Bobby Scheme has responded, repeat victimisation has dropped to 1% across the county. Nationally, the percentage of repeat victimisation is 14%. According to the Bedfordshire Crime Study 2005, the rate of repeat victimisation for Bedfordshire is an average of 9%.
The implementation plan stresses the importance of PCTs working with local authorities to deliver the white paper through local strategic partnerships and local area agreements.

**Local area agreements (LAAs)**

An underpinning theme for LAAs is about reducing inequalities in health through interventions which include both health care and broader determinants (SO6: 11).

LAAs have some mandatory indicators to improve community cohesion. They also have indicators to reflect the needs of some socially excluded groups such as those with mental illness and the elderly, depending on local needs. There is a mandatory indicator on reducing inequalities in health in terms of ‘all age all cause’ mortality rates.

**Valuing People: a new strategy for learning disability for the 21st century**

The Government published its white paper, *Valuing People*, in 2001. *Valuing People* recognises rights, independence, choice, and inclusion as key principles for services for learning disability and recommends that the services need to be tailored to individual needs.

**Gypsies and Travellers**

Since Traveller poor health has been identified as one of the biggest areas of health inequalities in the region (A Review of the Health Needs of Gypsy Travellers in the East of England, GO-East, 2006), Government Office and the Regional Public Health Group have undertaken to champion Traveller health issues, lead on the spread of good practice and continue to raise the profile of existing gaps in information needed for monitoring Travellers’ health. This will be achieved through the local area agreement process, working in partnership with the voluntary and community sector (SO6: 11) and by influencing the single issue review of Travellers’ sites for the Regional Spatial Strategy.

**Climate change**

Climate change poses a global health threat through an increased incidence of:

- heat-related deaths and illness
- food poisoning
- injuries during storm events
- air pollution
- skin cancer.

(*Climate Change and Human Health: risks and responses*, World Health Organisation, 2003)

In the East of England in particular there is an additional increased risk of flooding, due to its large low-lying areas. Flooding leads to disruption and displacement of communities and increased risk of disease and injury. Vulnerability to these impacts of climate change will depend on a range of factors including population density, existing health status, age and socio-economic status.

For this reason The Regional Health Strategy, *Healthy Futures* (EERA, 2005), identifies the need to ‘understand and plan for the impacts of climate change and the more sustainable use of resources within the region, in terms of health and health inequalities issues’ (SO6: 9).
3.1 – SO7: To improve access to services, especially for disadvantaged groups

Promoting access in its broadest sense is fundamental to achieving social inclusion. A variety of mechanisms can be used to improve access to services, and so increase take-up of services.

Improving access is often a case of reducing the need to travel by maximising the number of services provided within a local community.

For example:

1. in rural areas mobile units such as mobile libraries carry community information as well as delivering a range of healthcare provision such as podiatry and screening services. Yet, mobile units are only effective if everyone in the community, including those with a physical disability, is able to access the vehicle. Advances in ICT mean there is scope to widen this range further to enable access to job opportunities through virtual job centres, on-line training, shopping and banking.

2. the concept of the ‘one-stop shop’ reduces the need for services to be located separately. Village halls and community centres are again becoming hubs of community activity with a range of services being delivered. The village hall may include a local shop or Post Office service and in some rural communities the local pub has become the focus for service provision, including access to a cash point, if not other banking services.

3. to thrive, market towns need to adapt to the demands of those living there and in the surrounding area. They can be effective and sustainable hubs for retail and professional service provision, helping to address social exclusion in the neighbouring hinterland. It is important not to overlook the role of the private sector in delivering services such as local shops and pubs.

DEFRA’s Rural Services Standard sets out the levels of access to services which rural communities can expect to achieve. It followed publication of the Rural White Paper in Nov 2000, which set out the Government’s plan to deliver equitable access to everyday public services for people who live in rural areas. In 2003, the Government introduced a target to improve rural services, focusing on primary healthcare, post-16 education, public and community transport (SO7: 4), access to cash and e-Government information.

Again partnerships are key to delivering many of the innovative schemes and initiatives already in place. In particular, partnerships involving the private sector to ensure that policies provide effective incentives and disincentives encouraging providers to be both proactive and responsible in their provision for disadvantaged consumers (Everyday Essentials: meeting basic needs, National Consumer Council, 2003).

**Case study 30**

**The Participation Networks Forum (PNF)**

The PNF is a group of Essex voluntary organisations which aims to give a voice to adult social care service users and their carers. These include those with physical, sensory, learning and mental impairments. Sponsored and supported by Essex County Council’s Adult Social Care team, the PNF has been effective in influencing service improvements within the Council, for the benefit of people with disabilities and the wider community.

A major piece of their work has been to develop the Disability Equality Scheme with Essex County Council. The PNF will be monitoring the effectiveness of the scheme during the next three years.
i) Financial services

The Treasury-led Policy Action Team Report 14 has led to a number of important developments to improve access to banking. These are reflected in the range of local initiatives across the region that aim to encourage people to save, provide financial literacy training and access to loan finance at affordable rates (SO7: 1, 2, 3). Successful credit unions can help improve choice and access to financial services by offering fair, helpful and personalised services to all parts of the community. Many local Post Offices are now offering basic bank accounts following the introduction of direct credit transfer for the payment of welfare benefits.

The Financial Inclusion Taskforce (FIT) was launched in 2005 to monitor progress on government objectives relating to financial inclusion. FIT has drawn up the following framework for action:

- access to banking
- affordable credit
- face-to-face advice.

This is consistent with the experience of Citizens Advice, which states that successful financial inclusion activities require three key elements:

- delivery of financial literacy programmes
- access to debt advice
- access to affordable financial services (such as credit unions).

### Case study 31

**Moneysense Project**

This financial literacy programme funded by Essex County Council targeted junior schools, secondary schools, sixth forms, special needs schools and exclusion units in the Basildon area. Its aim was to help young people build on their sometimes limited knowledge of the financial world, equipping them to make more informed financial choices as they grow up.

Through a series of presentations and workshops the programme explored such issues as how bank accounts and credit cards work, and some of the potential pitfalls of the latter. Older children were also taught about earning a salary, budgeting, paying rent and avoiding debt.
Chapter 3 – Effective interventions

ii) Information and advice services

In an inclusive society individuals need to be empowered as much as possible to help themselves (SO7: 6). Voluntary sector advice services across the region provide good quality information, advice, support, advocacy and representation services to people concerning their legal rights and responsibilities. This may include advice on welfare benefit entitlements, dealing with debt, discrimination or for those who are threatened with homelessness. In 2006/7, for example, the Citizens Advice Bureaux in the region handled 164,593 enquiries relating to welfare benefits (National Association of Citizens Advice Bureaux, East of England branch).

The advice sector is diverse, reflecting the diversity in society, and includes both national organisations and local independent advice centres rooted in their communities. There are more that 150 advice agencies in the region providing generalist to specialist services on a range of social welfare law subjects.

Information and advice also needs to be provided in an accessible format, which means giving consideration to the presentation of material as well as the content, which should meet the Crystal Standard of plain English. It may be that other media are more appropriate, for example virtual, film, oral or hand-signing.

ICT has an increasingly important role in improving access to services. As well as a generic source of information, ICT also has a key role in the delivery of public services, making them more accessible and creating more efficient, joined up services centred on the needs of customers. The Government is working towards having more of its services available online and has set several targets for ICT access.

Due to national and regional changes, there are continued pressures on the advice sector. Forthcoming changes that will have considerable impact include:

- changes in government policy in relation to the Community Legal Service that will affect the way that legal advice services are funded and organised
- changes in legislation, for example around disability discrimination, welfare reform and mental health, that are likely to result in increased advice enquiries
- the housing programme in the region that will result in increased demand for infrastructure services, including advice.

Case study 32

Region’s credit unions respond to Farepak collapse

Following the collapse of the Farepak Christmas savings club in 2006, credit unions in the East of England met to discuss how best to support Farepak customers the following year.

Having drawn up a profile of Farepak customers and their requirements, the credit unions developed the Lock it Away Christmas savings account, which is regulated and protected by the Financial Services Authority. After a nominal joining fee customers are able to pay into their account using a PayPoint card, cheque, or standing order, at Post Offices or other participating retailers.

The Lock it Away savings campaign has been marketed across the region by staff from existing credit unions, which hope to help 4,000 new members save a total of £1 million over the 12 months to Christmas 2007.
To deal with the changing funding profile for advice the sector’s infrastructure organisations have come together as a regional consortium to form Advice Alliance East, broadly adopting a regional version of the national advice umbrella, Advice Alliance.

Advice Alliance East is working to ensure that regional and local government and other public bodies recognise the essential role played by advice and information services in promoting social justice and inclusion by enabling people to exercise their rights and to take up their responsibilities as citizens. In addition, Advice Alliance East aims to ensure that policy makers and funders take into account the voluntary advice sector’s contribution to the local community and provide adequate support for the sector.
iii) Transport services

Transport is important both in enabling people to access services, but also as a service in itself. To improve access to transport, we need to provide more efficient and effective transport options (SO7: 4), building on existing mechanisms such as concessionary fares, car pools and community transport schemes. These might include:

- dedicated transport provision for specific groups such as jobseekers and people on training schemes
- travel vouchers to promote flexibility and responsiveness to passenger needs
- subsidised vehicle loans or hire, and payment for driving lessons conditional on participation in education or employment programmes
- improved mechanisms for providing travel information and advice
- pay-as-you-drive vehicle insurance to lower costs for low-mileage drivers
- car pools that can help to share the costs of vehicle ownership.

The main mechanisms for achieving the above include:

- effective partnerships, for example LSPs and the rural transport partnerships currently operating in each county, to provide community transport solutions
- local authority transport plans, which provide an important mechanism for ensuring appropriate links are made between transport access and the planning and delivery of services
- cross-boundary working to maximise the opportunities for improved integration
- regional planning guidance which incorporates accessibility targets to ensure minimum public transport service levels.

Case study 33

Quality Taxi Partnership

In 2006, the Quality Taxi Partnership was established to improve taxi services in Basildon District and to encourage independent living amongst disadvantaged and socially isolated groups. One of only a few in England, the scheme’s initiatives include:

- a subsidised taxi scheme for a wide range of excluded groups, run by Basildon District Council in conjunction with the primary care trust, Connexions, local housing associations and schools
- driver training including passenger assistance, disability awareness and legal considerations
- provision of new and improved infrastructure, including new rank, shelters, improvements to routes and signage
- opening of bus lanes to taxi and private hire operators
- piloting the use of CCTV in taxi and private hire vehicles.
3.1 – SO8: To develop social networks, community assets and promote community cohesion

i) Social networks

Social inclusion is also about prospects, networks and life chances. Developing community assets and building social networks can contribute to reducing social exclusion or its effects on individuals or society. Social capital is a new concept, which is variously defined but includes:

- the level of social trust (how much people trust each other in general)
- the level of participation in political and civic action by members of the community
- the level of reciprocity (how much give and take there is between individuals within communities)
- the degree to which the social networks people have access to are extensive and supportive.

It would appear that building social capital could help mitigate the effects of exclusion throughout the lifecycle. For example, encouraging young people to be involved in community, civic and political life will help widen their social networks. It is equally important to ensure that older people can continue to make new, enriching, reciprocal relationships. The region scores highly on social support indicators compared with other regions in the UK. Sixty-six per cent of people reported having five or more people they could turn to in a crisis, compared with an average of 58% for the country as a whole (People’s Perceptions of their Neighbourhood and Community Involvement, Coulthard et al, London, Office for National Statistics, 2002).

Possible mechanisms for building social capital include:

1. encouraging the development of reciprocal relationships through:
   - Investing in activities which encourage socially excluded individuals to engage in community and voluntary activity
   - Regeneration teams building more reciprocal relationships between officers and community members (employing local people, officers more embedded within the community, co-mentoring schemes)
   - Encouraging Time Banks, credit unions and local exchange trading schemes and community investment projects, particularly in regeneration areas.

2. encouraging wide social networks through:
   - Regional and local planning guidance encouraging civic space planning
   - Supporting self-help groups and other collective community action.

3. encouraging more equal power relationships through:
   - Devolving decision-making and funding to community groups
   - Ensuring inclusive local planning processes
   - Employing local people as officers in regeneration schemes.
Chapter 3 – Effective interventions

Case study 34

**Anselm Community Centre project**

St Edmundsbury Borough Council worked with the local community on an estate in Bury St Edmunds to deliver a new community centre. The estate had been identified as a pocket of deprivation which lacked a suitable meeting place for residents or venue for service providers.

Opened in February 2007, the centre now provides activities and facilities for:

- elderly and disabled people and their carers
- those experiencing social isolation
- women and children
- young people
- residents from Black and ethnic minorities.

Involved in the project from the start, members of the local community have also increased their knowledge, skills and confidence.

Several residents have become trustees and directors of the charity which runs the centre. Members of the local Women’s Group, who were previously often isolated from the wider community, are now sitting on the management group of the centre, making decisions on its day-to-day running.

![Image of people with face paint at a table]
ii) Community assets

Using existing, and helping to further develop, community assets is important for achieving sustainable regeneration solutions (SO8: 2) and reducing grant dependency. Community and social enterprises can help to address poverty, unemployment and social exclusion among deprived communities in sustainable ways. As well as creating employment opportunities for those who face barriers to labour market participation, they provide goods and services to communities that can be socially excluded. They create wealth and reinvest it in disadvantaged areas.

Involving local communities in cultural activities is also very effective in helping to develop a sense of identity and community as reflected in the role it increasingly plays in regeneration projects. Many historic buildings are now being used as artists’ studios, workspaces for the creative industries, craft shops and galleries, healthy living centres or local learning centres. In the short-term, local communities benefit from the inward investment; in the longer-term from the increased employment and improved vitality that the new cultural activities bring, together with the quality of the built environment.

The Government is committed to promoting civil renewal and community capacity building. The Active Citizenship Centre was launched in December 2003 and has two main aims. Firstly, to bring together policy-makers, academics and members of the public to develop new ideas and draw on lessons learned. Secondly, to help develop policy-making and provide more support for existing government efforts to involve local people in identifying and solving the problems in their communities (SO8: 1). It is complemented by the Community and Voluntary Sector Strategy to further support the infrastructure of voluntary and community organisations and enable them to help shape and deliver high quality public services (SO8: 3, 4).

Case study 35

The Old Hemp Works community land trust, Halesworth

In the face of high land costs, fragmented ownership patterns and limited opportunities for community involvement in planning community land trusts (CLTs) represent an increasingly viable mechanism for maintaining housing affordability and providing low cost workspace for local services. At the same time, CLTs capture increases in land value for the lasting benefit of the community. Giving ownership of land to local people also makes it easier to maintain thriving, sustainable communities with diverse social provision, greenspace and community facilities.

Foundation East has set up a CLT at The Old Hemp Works in Halesworth, providing a legal infrastructure for local people to own the land there in perpetuity. The local community has been given the expertise to take on the democratic control of their assets, develop the site and access finance.

After 40 years’ of disrepair the property is being developed into eight small business units and a community meeting room, which research identified as critical for the area to thrive.
Chapter 3 – Effective interventions

iii) Community cohesion

Nationally, the Government is committed to creating a cohesive society, which promotes equality and diversity and safe and strong communities for all. In Our Shared Future (2007) the recently-established Commission for Integration and Cohesion proposes four key principles to underpin integration and cohesion:

- a sense of ‘shared futures’, with an emphasis on what binds communities, rather than what divides them
- a ‘new model of rights and responsibilities, clarifying the obligations and rewards of citizenship, both for individuals and groups
- an ‘ethics of hospitality’ which places emphasis on mutual respect and civility
- a ‘commitment to equality’ (SO8: 6, 8 and SO7: 7), recognising the need to deliver ‘visible social justice’ and build trust in the institutions which arbitrate between groups.

The latter principle will also be supported by the Government’s creation of a new single Commission of Equality and Human Rights (CEHR) from 1 October 2007, as an outcome of the Equality Act 2006. The purpose of the CEHR is to reduce inequality, eliminate discrimination, strengthen good relations between people and protect human rights.

The CEHR will take on all of the powers of the existing Commissions as well as new powers to enforce legislation more effectively and promote equality for all. It will champion the diverse communities that make up modern Britain in their struggle against discrimination. It will also promote awareness and understanding of human rights and encourage good practice by public authorities in meeting their Human Rights Act obligations.

Other mechanisms for developing community cohesion at a regional level include:

- initiatives such as local and regional compacts as a means of recognising and valuing the diversity of knowledge, skills and experience of different communities and sectors
- opportunities for people from different communities to meet and discuss issues and concerns that affect them all, to understand and respect each other’s cultures and to develop a shared vision for their neighbourhood (SO8: 7).

Good examples already exist around the region:

- use of local forum style meetings to explore issues of concern and to increase understanding of the UK culture and key services such as health, housing, education, legal help and welfare benefits. It is also important that different sections of the community are involved in planning and policy development as appropriate
- regional networks and public bodies acting as a conduit for good practice to ensure that different parts of the region can learn from good practice and adapt this to their area. Regional bodies help disseminate information on the Government’s Community Cohesion Programme. Regional inter-faith networks have a key role in ensuring that prejudice and misconceptions about particular faiths are dispelled (SO8: 7)
- EERA’s Strategic Migration Partnership (EERA-SMP) is in the process of producing a regional Refugee Integration Framework (SO7: 5)
- Peterborough’s New Link centre provides a one-stop information service to asylum seekers, refugees and migrant workers, to help them integrate into the city (SO8: 5). The centre also provides advice and information to local communities on issues relating to asylum and immigration.
Case study 36

Traveller site, Cottenham

Pupils at Cottenham Village School have had lessons on the theme of conflict in the community, exploring themes of racism and prejudice towards Travellers. The lessons looked at how such prejudice is fuelled by myth, gossip, misunderstanding and the media, often leading to community conflict.

Subsequently arrangements were made for pupils from the school to visit their local Traveller site with a questionnaire for their GCSE coursework. This looked at Traveller lifestyle and how relations between Travellers and the wider community might be improved. The pupils were made very welcome and their questions were answered in detail, changing their perceptions of Travellers and Traveller sites in a positive way. The Traveller residents, who are often reluctant to allow their children to transfer to secondary school, also reported being very impressed with the pupils from the village college.

A DVD* of this project has now been produced and a number of excellent suggestions for improving community cohesion have been passed on by the pupils to members of the community with the influence to act upon them.

* Copies of the DVD can be requested from: Team for Traveller Education, Cambridge Professional Development Centre, Foster Road, Trumpington, Cambridge, CB2 2NL, Tel. (01223) 508 700.

Case study 37

Gateway Protection Programme

In December 2006 12 Congolese families from a refugee camp in Zambia started a new life in Norwich under the Gateway Protection Programme, a partnership between the UK Government and the United Nations High Commission for Refugees. Gateway provides a route to the UK for some of the most vulnerable refugees in the world, who are often also survivors of torture, rape or other severe trauma. Some of them will have spent up to ten years in a refugee camp.

Since their arrival the refugees have received co-ordinated support, advice and help from a range of local agencies, which has been an invaluable factor in their successful integration into their new communities.

Action plan

The action plan which accompanies this strategy (see inside back cover) stems from the preceding analysis and findings of the strategy review undertaken by a multi-agency project team during 2007.
## Glossary

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<td>CBL</td>
<td>Choice-based lettings</td>
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<td>CDFI</td>
<td>Community development finance institution</td>
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<td>CEHR</td>
<td>Commission for Equalities and Human Rights</td>
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<td>CLG</td>
<td>Communities &amp; Local Government (formerly ODPM)</td>
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<td>CLT</td>
<td>Community land trust</td>
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<td>Community &amp; Voluntary Forum for the Eastern Region</td>
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<td>East of England Regional Assembly</td>
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<tr>
<td>EERA-SMP</td>
<td>East of England Regional Assembly Strategic Migration Partnership</td>
</tr>
<tr>
<td>EESCP</td>
<td>East of England Skills and Competitiveness Partnership</td>
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<tr>
<td>ERPHO</td>
<td>Eastern Region Public Health Observatory</td>
</tr>
<tr>
<td>ESOL</td>
<td>English for speakers of other languages</td>
</tr>
<tr>
<td>Fte</td>
<td>Full-time equivalent</td>
</tr>
<tr>
<td>GO-East</td>
<td>Government Office for the East of England</td>
</tr>
<tr>
<td>ICT</td>
<td>Information and communications technology</td>
</tr>
<tr>
<td>IiC</td>
<td>Investing in Communities</td>
</tr>
<tr>
<td>IRS</td>
<td>Integrated Regional Strategy</td>
</tr>
<tr>
<td>Acronym</td>
<td>Description</td>
</tr>
<tr>
<td>---------</td>
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</tr>
<tr>
<td>JRF</td>
<td>Joseph Rowntree Foundation</td>
</tr>
<tr>
<td>LAA</td>
<td>Local area agreement</td>
</tr>
<tr>
<td>LEA</td>
<td>Local education authority</td>
</tr>
<tr>
<td>LSC</td>
<td>Learning &amp; Skills Council</td>
</tr>
<tr>
<td>LSP</td>
<td>Local strategic partnership</td>
</tr>
<tr>
<td>MENTER</td>
<td>Minority Ethnic Network for The Eastern Region</td>
</tr>
<tr>
<td>META</td>
<td>Mobile Europeans Taking Action</td>
</tr>
<tr>
<td>NHS</td>
<td>National Health Service</td>
</tr>
<tr>
<td>NOMS OASys</td>
<td>National Offender Management Service Offender Assessment System</td>
</tr>
<tr>
<td>ODPM</td>
<td>Office of the Deputy Prime Minister (now CLG)</td>
</tr>
<tr>
<td>OSEP</td>
<td>Observatories Social Exclusion Partnership</td>
</tr>
<tr>
<td>PCT</td>
<td>Primary care trust</td>
</tr>
<tr>
<td>PIU</td>
<td>Performance Innovation Unit (now Prime Minister’s Strategy Unit)</td>
</tr>
<tr>
<td>PRIME</td>
<td>National organisation to help people over 50 set up in business</td>
</tr>
<tr>
<td>PSA</td>
<td>Parent support advisor</td>
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<td>PSA7</td>
<td>Public Service Agreement 7</td>
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<td>Social Exclusion Unit</td>
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<td>SSA</td>
<td>Sector skills agreement</td>
</tr>
<tr>
<td>UKYP</td>
<td>UK Youth Parliament</td>
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<td>YIPPEE</td>
<td>Youth Involvement Participation Partnership of the East of England</td>
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<td>YOT</td>
<td>Youth Offending Team</td>
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</table>
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