

# Final Report July 2006

## A Social Capital Framework and Assessment for Glasgow

Prepared for  
The Social Capital Working Group

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# Executive Summary

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## Background and objectives

Social capital is a concept that is gaining in popularity and momentum around the world. The standard definition is that developed by the OECD:

*“networks together with shared norms, values and understandings that facilitate co-operation within or amongst groups”* (Cote and Healy, 2001).

Within the United Kingdom, the Office for National Statistics plays the leading role in standardising measurements of social capital and the ONS social capital framework of assessment has been employed throughout this report. A summary of the ONS framework plus some key social capital measurements for Glasgow are presented on pp. 7- 9 of this report

Areas with high levels of social capital generally enjoy social and economic benefits and, in line with the OECD’s challenge to Glasgow to become a *“really ambitious”* city, Scottish Enterprise Glasgow commissioned FMR Research to develop a Social Capital Framework and Assessment for Glasgow. The work undertaken by FMR Research responded to three key objectives:

- make an assessment of the levels of social capital in Glasgow and the potential scope for developing it;
- collate available data on social capital at Scottish, Glasgow and local levels; and
- recommend further actions for the Social Capital Working Group to take forward.

## Method

FMR’s research strategy had five distinct stages:

- a Social Capital Working Group was established to determine the scope and scale of the project. Key members of the working group included representatives from Scottish Enterprise Glasgow, the Glasgow Centre for Population Health and FMR Research;
- a development workshop involving Glasgow-based social capital stakeholders was organised to develop an understanding of the facets of social capital relevant to Glasgow and to devise metrics for measuring these dimensions;
- secondary data was collated and interrogated to ascertain existing levels of social capital within Glasgow;
- primary research for the project took the form of thirteen focus groups with a range of Glasgow citizens, and depth interviews with thirteen representatives of Glasgow-based organisations with a strong interest in social capital; and
- the final stage of the project was the development of the research findings into the assessment of social capital, the production of the Social Capital Framework and Assessment for 2005, and the recommendations for the Social Capital Working Group to take this forward.

## Findings

### Secondary data analysis

The most concise summary of the secondary research findings is contained in the Social Capital Framework and Assessment for Glasgow presented on pp. 7- 9 of this report. This framework also identifies areas in which measures of social capital in

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Glasgow are currently lacking. Some highlights from the secondary data are outlined below.

Glasgow enjoys significant levels of social capital with regard to Dimension 2 (social networks and social support), segments of Dimension 3 (reciprocity and trust), and Dimension 5 (view of the local area). In 2002, only 15% of Glaswegians experienced occasional feelings of isolation from family and friends and, in that same year, 75% of Glaswegians agreed with the statement 'If I have a problem, there is always someone to help me'. In 2002, two-thirds of Glaswegians said they lived in a neighbourhood where neighbours 'look out for each other', while 86% of Glaswegians rated their neighbourhood as a good or fairly good place to live in 2003- 04.

While Glasgow recorded significant levels of social capital with regard to Dimensions 2, 3 and 5, the findings for Dimension 1 (social participation) and Dimension 4 (civic participation) were less encouraging. In 1999, 30% of Glaswegians were members of social clubs, associations or church groups but this had declined to 20% by 2002 and in 2003- 2004, only 21% Glaswegians gave up time on a voluntary basis to assist clubs, charities, campaigns or organisations. Religious affiliation also evidenced signs of decline. Between 2001 and 2004, the number of Glaswegians who identified themselves as Church of Scotland, Roman Catholic or Muslim (the city's three principal religions) declined dramatically and in 2002, only 14% of Glaswegians regularly attended Christian church services on Sunday (compared to 22% in 1984).

The retreat from social participation was matched by a retreat from civic participation (Dimension 4). In 2002, only 58% of Glaswegians endorsed the statement 'by working together, people in my neighbourhood can influence decisions that affect my neighbourhood'. In 2003, 80% of Glaswegians said that they knew little or hardly anything about the workings of Glasgow City Council and only 50% of eligible Glaswegians voted in the 2005 General Election.

Social capital did not appear to vary significantly by gender, but it varied significantly according to age and socio-economic status. Older Glaswegians reported significantly higher levels of social capital than younger Glaswegians in six areas (Dimensions 1.1, 3.1, 3.4, 4.2, 5.1, 5.3), and only in one facet (4.8) did younger Glaswegians record higher levels of social capital than their elders. Similarly, residents of the city's more affluent areas (depcats 1 and 2) recorded higher levels of social capital than residents of depcats 6 and 7 in twelve clear areas (Dimensions 1.1, 1.5, 2.1, 3.1, 3.4, 4.2, 4.3, 4.7, 4.8, 5.1, 5.3 and 5.4). Reasons for such variations are not hard to find – residents of socially deprived areas generally enjoy lower incomes, higher unemployment levels, poorer housing and lower educational attainment than residents of more affluent areas.

## **Primary research**

Eight major themes emerged from the primary research conducted among Glasgow's citizens and stakeholders, and these are outlined below.

### ***Bonding social capital***

Glasgow has high levels of bonding social capital and considers itself skilled in generating bonds. Bonding social capital refers to the ability to form links and relationships with groups and individuals regarded as similar. When invited to offer an informal score on this issue during focus groups, citizens awarded the city 8 out of 10 while stakeholders gave a rating of 3 out of 5 during formal depth interviews. Many focus group members commented on the city's 'warmth' and general enthusiasm for making bonds.

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### ***Bridging social capital***

While Glasgow enjoys high levels of bonding social capital, its record on bridging social capital is less impressive. Bridging social capital refers to the ability to form links and relationships with groups and individuals perceived to be different. Citizens awarded the city 3.5 out of 10 during focus groups, while stakeholders awarded 2 out of 5 during formal depth interviews and expressed the view that much work needs to be done in this area.

### ***Bonding vs. Bridging***

Some citizens and stakeholders suggested that Glasgow's skill in creating bonding social capital may inhibit its ability to generate bridging social capital. In the opinion of some contributors, 'tribal' feelings predominate in some parts of the city, and some individuals are so keen to bond with other members of their 'tribe' that they ignore 'outsiders' or view them as threats.

### ***Prejudice***

Glasgow's long tradition of sectarian division also inhibits its ability to generate high levels of bridging social capital. Many citizens and stakeholders also expressed the view that homophobia and racial prejudice continue to blight the lives of many groups and individuals who are perceived as 'different', and this hampers Glasgow's ability to create bridging social capital.

### ***Territoriality and urban demography***

Glasgow's urban demography may also inhibit the development of social capital. In the opinions of several contributors, Glasgow consists of a range of small tightly-knit neighbourhoods which often manifest strong feelings of territoriality and, while this can foster social capital within an enclave, it can retard the development of social capital across neighbourhoods, with violence often taking the place of cooperation.

### ***Appetite for improvement***

Despite these problems, citizens and stakeholders expressed enthusiasm for improving bridging and bonding social capital within the city. Stakeholders expressed strong enthusiasm for developing bridging social capital and many citizen contributors were keenly aware of the benefits to be derived from meeting and interacting with 'different' people.

### ***Public agencies***

Neither citizens nor stakeholders felt that the prime responsibility for improving social capital in the city should rest with individual citizens. Both groups felt that public agencies had a key role to play in boosting social capital within the city, and citizen contributors identified four principal means of boosting social capital within the city, all of which depended on increased provision of public resources and public intervention.

### ***The work-life balance***

Citizens and stakeholders both felt that the current work-life balance often discourages individuals from contributing to social capital in the city. Unemployed citizens can often be time-rich and cash-poor and lack the resources (social and financial) to become socially engaged. At the same time, more affluent citizens in well-paid jobs often lack the time (and energy) outside of working hours to become socially involved.

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## **Recommendations**

Members of the citizens' focus groups identified four principal ways in which the city's levels of social capital could be enhanced. These suggestions are outlined below.

### ***Increased recreational and sporting facilities for younger people***

Many group members (especially older women, young people and less affluent males) felt that increased provision of recreational facilities for young people (especially 14-18 year olds) would boost levels of social capital, involvement and integration within the city. Older female participants also wanted more adults to become involved in running football teams, Boys Brigade companies, scout troops, karate clubs, etc.

### ***Increased community facilities***

Some young male focus group members recommended increased provision of community facilities as a means of boosting social capital. Two contributors felt that community radio could play a vital role in providing 'social glue' and disseminating information, and several young females felt that Glasgow City Council should be more proactive in publicising the community facilities which it does provide. Disability group members identified increased provision of accessible facilities (especially with regard to public transport) as a key means of improving social capital within the city.

### ***Education and prejudice***

Many focus group members felt that education had a vital role to play in promoting social capital and combating unhelpful stereotypes which retard the development of social capital. Education was identified as a key means of combating much of the prejudice that has been directed towards asylum seekers, and some focus group members felt that the media's handling of refugee and asylum seeker issues had contributed to tensions in this area.

### ***Increased policing and surveillance***

Several contributors felt that increased policing and surveillance (through CCTV cameras) would assist the formation of social capital by making people feel safer and more inclined to leave their homes. Two young males identified increased community policing as a constructive means of promoting social capital, and older females expressed support for increased provision of community policing and higher numbers of female police officers.

## **Next steps**

This research has revealed valuable information about levels of social capital within Glasgow – its strengths, its weaknesses and opportunities for development. As part of Glasgow's quest to be a "*really ambitious*" city, it ought to invest resources in tracking change in the city's social capital over time. Only by gathering such information will policy-makers know if their regeneration and development strategies are producing the desired effect. This research has identified secondary data sources capable of offering feedback on social capital and has also developed a methodology for conducting primary research on the subject. As such, it offers an excellent starting point for the city.

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# 1 Introduction

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## 1.1 Purpose of this report

This report has been produced in response to the OECD's challenge to Glasgow. The challenge was for Glasgow to become *"really ambitious"*. Scottish Enterprise Glasgow identified four areas for focus: confidence, creativity, 21<sup>st</sup> century skills, and the subject of this project, social capital.

Social capital is a popular phrase that has gained momentum and meaning within the UK and across the world. As a working definition it is useful to use that adopted by the OECD:

**"networks together with shared norms, values and understandings that facilitate co-operation within or amongst groups"** (Cote and Healy, 2001).

It is generally accepted that developing social capital has social and economic benefits at all levels: local, regional and national. However, there are inherent problems with defining how social capital can be measured and how it can be nurtured and developed. A UK framework for the measurement and analysis of social capital has been developed, and this is the basis for Glasgow's analysis.

The framework has been developed by identifying what appear to be the main dimensions for the measurement of social capital and then considering what aspects of those dimensions we should be looking to measure. The table in Section 2 outlines the five themes or dimensions.

It was felt that the most useful way of investigating and reporting was to produce a Social Capital Framework and Assessment for Glasgow. As an initial step to informing their contribution to the Social Capital Framework and Assessment, the Social Capital Working Group elected to identify areas in Glasgow where social capital is already well established and areas where there is scope for further development.

The Social Capital project undertaken by FMR responded to the research brief below.

*To assist the Social Capital Working Group in meeting its objectives, we wish to commission some preliminary research. Using the social capital measurement framework outlined, the broad aims of the research will be to:*

- *make an assessment of the levels of social capital in Glasgow and the potential scope for developing it; in relation to the 5 dimensions of social capital);*
- *collate available data on social capital at Scottish, Glasgow and local levels;*
- *recommend further actions for the Social Capital Working Group to take forward.*

## 1.2 Research strategy

This was the five-step research strategy followed by FMR.

- Project scoping. The purpose of this was the determination of the scale and scope of the project, with reference to the five dimension social capital framework. This included the creation of the Social Capital Working Group which included representation from Scottish Enterprise Glasgow, the Glasgow Centre for Population Health and FMR Research.



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- Development workshop involving a range of stakeholders. At this workshop FMR started to develop the facets of social capital and the metrics for each of the five dimensions, to explore their relationship to the main construct, consider the implications of the Framework and Assessment approach to research design, and determine data sources and depth of data required.
  - Collation of secondary data. This involved the sourcing and interrogation of secondary data capable of illuminating the social capital dimension and facets. The selection of secondary data to populate the Social Capital Framework and Assessment for Glasgow was heavily influenced by the robustness of data source, and the likelihood of further data through the same source in years to come, for comparison.
  - Primary research. The primary research element involved the development of a questionnaire and the scoping of additional survey work. The primary research was aimed at supplementing the insight from the secondary data. The Social Capital Working Group agreed two avenues for additional research: focus groups with a range of Glasgow citizens and one-to-one interviews with representatives of prominent Glasgow organisations with an interest in social capital.
  - Data interpretation and recommendations. The final stage of the project was the development of the research findings into the assessment of social capital, the production of the Social Capital Framework and Assessment for 2005, and the recommendations for the Social Capital Working Group to take this forward. Involved in this last stage was the design and facilitation of the discursive seminar.

### **1.3 The context**

Over the past year, more than 60 people from a wide variety of backgrounds have been involved in individual conversations and workshops discussing Glasgow's OECD challenge and their experiences and perspectives, and developing views on what issues need to be addressed in taking Glasgow forward. A consistent set of themes has come out of this process, common to the employability, health, education and other agendas. These themes are:

- Confidence
- Creativity
- 21<sup>st</sup> Century Skills
- Social Capital.

Underpinning all of these themes is the concept of the 'deficit model', which shapes a great deal of public policy but also limits its effectiveness: by defining people in terms of what they don't have and targeting groups through convenient bureaucratic labels, interventions fail to capture peoples' motivation and drive to find their own solutions. There is growing research and policy interest in the concept of social capital, the degree to which people communicate and work together to achieve mutual benefits in economic performance or other areas, e.g. health. Working with communities to build their asset base could bring a move away from the deficit model.

Scottish Enterprise Glasgow is currently developing a new process to aid the implementation of a Skills Strategy for Employability to meet the requirements of the Employability Directorate and the New Joint Economic Strategy for Glasgow. Therefore, it has been agreed that all of the work that has been undertaken to date within the wider OECD project (including social capital) is now going to be taken forward as part of Scottish Enterprise Glasgow's process for developing its future Employability Strategy.

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Early consultation with key partners and stakeholders has taken place to inform developments of the strategic process and to highlight issues and thoughts at an early stage. In order to align with the Joint Economic Strategy for Glasgow the same key questions are being discussed:

- where are we now and where are we forecast to be in ten years?
- what is the scale of the challenge?
- what are the potential interventions and projects to meet the challenges?
- where do we want to be in 2015? (step change)
- what action would be required to achieve this?

Two key working groups have been set up and will meet three times over the next four months. These groups and the wider strategy developed will provide a focus to take this work forward and look at an action plan for integrating social capital (including the research findings) into the city's wider economic development strategy.

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## 2 Framework

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### 2.1 Social capital framework and assessment structure

The term 'social capital' is employed by a variety of agencies around the world and numerous definitions are employed to clarify the term. The definition employed in this report is that favoured by both the OECD and the United Kingdom's Office for National Statistics (ONS). Since 2001, the ONS has played a leading role in standardising the definition of social capital used throughout the UK and has developed the framework for measuring social capital employed in this report. Both the OECD and ONS use the social capital definition developed by Cote and Healy:

*"networks together with shared norms, values and understandings that facilitate co-operation within or amongst groups".*

The ONS framework employs five dimensions of social capital – social participation, social networks and social support, reciprocity and trust, civic participation, view of the local area – and a range of sub-facets within these dimensions (see below). The dimensions include both behavioural questions and attitudinal or subjective questions, and it is important that both types of questions are covered as the core components of social capital (networks, shared norms and values) cover both. The ONS framework offers an excellent generic means of analysing and understanding social capital but it was essential, for the purposes of this report, to develop a conceptual understanding of social capital and means of measuring it which were relevant to Glasgow's unique social and economic conditions. Consequently, a workshop involving a range of Glasgow-based stakeholders was organised in the early stages of this project to develop an understanding of the facets of social capital which were relevant to Glasgow and to devise metrics for measuring the five dimensions. The workshop also helped to determine the data sources and depth of data required for the Social Capital Framework and Assessment.

The Social Capital Framework and Assessment for Glasgow presented below was informed by the findings of this workshop and offers a concise summary of the state and nature of social capital in Glasgow in the early years of the new millennium.

Column 1 lists the five major dimensions of social capital and the multiple facets within each dimension.

Column 2 presents a 'headline message' summarising some of the principal findings contained within this report (section 3 contains more detailed analysis). Many dimensions and facets were populated with readily available data but there are a number of key areas in which no attempt has yet been made to measure levels of social capital in Glasgow. These omissions should be rectified in further development of the Social Capital Framework and Assessment.

Column 3 denotes the source from which this 'headline message' was gleaned and also indicates sources which can be used to populate future editions of the Social Capital Framework and Assessment.

<b>Dimension/Facet</b>	<b>Data</b>	<b>Source</b>
<b>1. Social Participation (networks)</b>		
1.1) number of cultural, social leisure groups belonged to: frequency and intensity of involvement	20% of Glaswegians said they belonged to a social club, association or similar.	GGNHS Board, Health and Well-Being Study, 2002
1.2) involvement with voluntary organisations: frequency and intensity of involvement	21% of Glaswegians said they had given up time for charity/local groups in the past year.	Scottish Household Survey, 2003-04
1.3) religious/ spiritual activity	In 2002, 14% of Glasgow's adult population said they normally attended a Christian church on Sunday.	Religious Trends 4, Christian Research, 2003-04
1.4) networks in the workplace	Data on workplace networks tend to be from staff/ employee surveys. Such surveys are voluntary, private in output and inconsistent in method.	n/a
1.5) TV viewing habits	30% of Glaswegians watched 1-2 hours of TV per day in 2003, 38% watched 2-4 hours per day, while 26% watched 5+ hours per day.	Scottish Enterprise Glasgow and Market Research UK, 2003
<b>2. Social networks and social support (networks)</b>		
2.1) frequency of seeing and speaking to relatives, friends or neighbours	15% of Glaswegians said that they sometimes felt isolated from family and friends.	GGNHS Board Health and Well-Being Study, 2002
2.2) virtual networks: frequency and intensity of contact	33% of the city's 16+ population enjoyed domestic internet access in 2004.	Scottish Household Survey, 2003-04
2.3) how many close friends or relatives live nearby who can be relied on to provide help	No secondary data sources identified to illuminate this indicator. It was explored in the study's primary research through qualitative method.	n/a
2.4) what prevents people from asking for help/engaging	No secondary data sources identified to illuminate this indicator. It was explored in the study's primary research through qualitative method.	n/a
2.5) the degree to which people feel they can be themselves and the degree to which they felt defined by other people	No secondary data sources identified to illuminate this indicator. It was explored in the study's primary research through qualitative method.	n/a

<b>Dimension/Facet</b>	<b>Data</b>	<b>Source</b>
<b>3. Reciprocity and trust (shared norms and values)</b>		
3.1) trust in people who are like you	In 2002, 67% of the City's 16+ population felt that they lived in a neighbourhood where neighbours looked out for each other.  In 2002, 69% of Glaswegians thought that they could trust people in their local area.	GGNHS Board Health and Well-Being Study, 2002  GGNHS Board, Health and Well-Being Study, 2002
3.2) trust in other people who are not like you – willingness to experience diversity in terms of class, ethnicity, race, gender. Willingness to try new and different things. Attitudes towards LGBT and BME communities	No secondary data sources fully illuminate this dimension.	n/a
3.3) people will do favours and vice versa - networks that promote diversity and introduce people to individuals with different perspectives.	No secondary data sources identified to illuminate this indicator. It was explored in the study's primary research through qualitative method.	n/a
3.4) perception of shared values	55% of Glaswegians agreed with the statement 'I feel valued as a member of the community'.	GGNHS Board Health and Well-Being, Study 2002
<b>4. Civic participation (co-operation)</b>		
4.1) confidence in institutions at different levels - are agencies responsive to local interests and needs?	No secondary data sources identified to illuminate this indicator. It was explored in the study's primary research through qualitative method.	n/a
4.2) perceptions of ability to influence events - access to decision-makers and networks of influence	58% of Glaswegians agreed that, by working together, people in their neighbourhood could influence decisions that affected their neighbourhood.	GGNHS Board Health and Well-Being Study, 2002
4.3) how well informed about local or national affairs -identification with a Glasgow-wide leader/enabler	In 2003, 80% of Glaswegians said they knew 'hardly anything' or 'just a little' about Glasgow City Council.	Glasgow City Council Citizens Panel, 2003
4.4) contact with public officials or political representatives - access to decision-makers and networks of influence Identification with and access to a Glasgow-wide leader and enabler	In 2003, only 10.8% of Glaswegians contacted their councillor, while 88% of Glaswegians reported no contact with their councillor during this period.	Glasgow City Council Citizens Panel, 2003
4.5) involvement with local action groups	In 2003-04, 70% of Glaswegians who supported charities and local groups gave their support to one principal charity (30% supported more than one charity).	Scottish Household Survey, 2003-04
4.6) frequency and propensity to vote	50.2% of eligible Glaswegians voted in the 2005 general election.	Glasgow City Council
4.7) perceived control over life	95% of Glaswegians said they felt in control of decisions affecting their lives, such as planning a budget, moving house or changing jobs.	GGNHS Board Health and Well-Being Study, 2002
4.8) satisfaction with life	In 2002, 85% of Glaswegians rated their quality of life positively.	GGNHS Board Health and Well-Being Study, 2002

Dimension/Facet	Data	Source
<b>5. View of the local area (shared norms and values)</b>		
5.1) views of the physical environment	In 2003-04, the most frequently cited causes of dissatisfaction with the environment were rubbish or litter lying about and groups of young people hanging about (48% and 46% respectively saying very or fairly common).	Scottish Household Survey 2003-04
5.2) facilities in the area	In 2003-04, 92% of Glaswegians rated grocery/ food shops as their most conveniently located facility. Outpatient services were identified as the least conveniently located facility.	Scottish Household Survey 2003-04
5.3) enjoyment of living in the area	86% of the City's 16+ population rate their neighbourhood positively as a place to live, although this figure is slightly below that for Scotland as a whole.	Scottish Household Survey 2003-04
5.4) fear of crime	93% of Glaswegians agreed with the statement 'I feel safe in my own home'.  62% of Glaswegians agreed with the statement 'I feel safe walking around the area even after dark'.	GGNHS Board Health and Well-Being Study, 2002  GGNHS Board Health and Well-Being Study, 2002

## 2.2 Development of the Social Capital Framework and Assessment

The structure of the Social Capital Framework and Assessment is the result of a development process that considered various possible dimensions of social capital. These are the steps taken by the Social Capital Working Group in the development of the Social Capital Framework and Assessment and an outline of the data sources considered and used in its completion.

### 2.2.1 Data sources used and cited in the report

- 2001 Census returns
- *A Longitudinal Investigation of the Experiences of Racism and Discrimination by Young People in Glasgow* (Glasgow Anti Racist Alliance and University of Strathclyde, 2004)
- *Assessing the impact of REAL Community Learning Centres* (Newhaven Research, 2004)
- Glasgow City Council, General Election returns, 2005
- Glasgow City Council Citizen's Panel, 2003 (MORI)
- GGNHS Board, Health and Well-Being Study, 1999
- GGNHS Board, Health and Well-Being Study, 2002
- Religious Trends 4, Christian Research, 2003-04
- *Scottish Enterprise Lifelong Learning Attitudinal and Behavioural Study* (Scottish Enterprise Glasgow and Market Research UK, 2003)
- Scottish Household Survey, 2001-02
- Scottish Household Survey, 2003-04
- Scottish Social Attitudes, 2004

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## 2.2.2 Publications considered during the course of the research but not cited in the final report

### Global

- *A Transatlantic Divide? Social Capital in the United States and Europe* (European Social Survey Conference, 2003)
- *Measuring Social Capital: an integrated questionnaire* (World Bank, 2004)
- *Social Capital and the Equalising Potential of the Internet* (Social Science Computer Review, vol. 20, no. 2, pp. 109- 115)
- *Understanding and Measuring Social Capital: a synthesis of findings and recommendations from the Social Capital Initiative* (World Bank, 2001)

### United Kingdom

- *Review of 'Social Capital: A Discussion Paper'* (Cabinet Office Performance and Innovation Unit, 2002)
- *Social Capital Matrix of Surveys* (Office of National Statistics, 2002)
- *Social capital, health and economy in South Yorkshire coalfield communities* (Centre for Regional Economic and Social Research, 2000)
- *The Influence of Social Support and Social Capital on Health: A Review and analysis of British data* (Health Education Authority, 1999)

### Scotland

- *Community Well-being: A discussion paper for the Scottish Executive and Scottish Neighbourhood Statistics* (NHS Health Scotland, 2003)
- *Gender and Ethnicity Impact Assessment* (Oxfam, Scottish Poverty Information Unit, 2005)
- *Individual Well-being: A report for the Scottish Executive and Scottish Neighbourhood Statistics* (NHS Health Scotland, 2003)
- *Lifelong Learning: Attitudinal and behavioural study* (Scottish Enterprise Glasgow and University of Strathclyde, 2004)
- *Social Capital – a short discussion paper* (Public Health Institute of Scotland, no date)
- *Social Capital and measurement of the 'the social': where does the sense of coherence fit in?* (Health Education Board Scotland, no date)
- *Social Capital Theory: A Review* (Applied Educational Research Scheme, 2005)
- *Social Capital Research Literature: A Preliminary Review* (Applied Educational Research Scheme, 2005)
- *Social Capital: A Review of Policies* (Applied Educational Research Scheme, 2005)
- *Strathclyde Police Public Perception Monitor: Final Report and Executive Summary* (Progressive Partnership, 1999)
- *Turning the Tide: Report of the 2002 Scottish Church Census* (Christian Research, 2003)
- *Working Paper 1: Introduction to Social Capital* (Centre for Research and Development in Adult and Lifelong Learning, 2005)

## 2.2.3 Focus groups consulted during the research

Focus groups were conducted with the following thirteen categories.

- Black and minority ethnic (BME) males
- Black and minority ethnic (BME) females
- Young males
- Young females
- Affluent females
- Mid-affluent females
- Less affluent females
- Affluent males

- 
- Mid-affluent males
  - Less affluent males
  - Lesbian, Gay, Bisexual and Transgender (LGBT) community
  - People with disabilities
  - Older people (n.b. older males and females were invited to attend this group but, on the day, no males were present)

#### **2.2.4 Stakeholder interviews**

Detailed, face to face interviews were conducted with senior representatives of the following organisations.

- Community Councils' Resource Centre
- Community Health Exchange
- Glasgow Anti Racist Alliance
- Glasgow City Council Development and Regeneration Services
- Glasgow City Marketing Bureau
- Glasgow Community Planning Partnership Support Team
- Glasgow Council for the Voluntary Sector
- Glasgow Housing Association
- Greater Glasgow NHS Board
- Scottish Enterprise Glasgow
- Stonewall
- Strathclyde Police
- University of Glasgow, Department of Urban Studies
- Representatives of Glasgow City Council Social Work Services, Glasgow City Council Cultural and Leisure Services, Glasgow Chamber of Commerce and the Leader of Glasgow City Council were invited to participate in interviews but declined.



## 3 Secondary data analysis

This section outlines the findings from the secondary data analysis for the Social Capital Framework and Assessment and provides more detail on each dimension and facet.

### 1. Social Participation (networks)

#### 1.1 Number of cultural, leisure, social groups belonged to: frequency and intensity of involvement, location of group (in/out of area)

In the 2002 GGNHSB Health and Well-being Study, one in five residents said they belonged to a social club, association, church group or similar. Attendance at such groups has declined from 30% in 1999 to 20% in 2002 and this decline occurred across all age, gender and depcat groupings. The figures for 2002 indicate that older people are more likely to belong to cultural, leisure and social groups than younger people, and that individuals living in less deprived areas are more likely to belong to cultural, leisure and social groups than those who live in more deprived areas (25% in depcat 1/2 compared with 16% in depcat 6/7).

**Figure 1 Do you belong to any social clubs, associations, church groups or anything similar? (positive responses)**

		2002		1999	
		No.	%	No.	%
Total		361	20%	510	30%
Gender	Male	189	22%	267	34%
	Female	172	18%	243	27%
Age	16-24	51	19%	93	32%
	25-34	49	14%	72	21%
	35-44	46	13%	71	27%
	45-54	51	20%	68	30%
	55-64	53	25%	82	36%
	65-74	61	33%	79	42%
	75+	45	31%	45	33%
Depcat	1/2	85	25%	108	37%
	3/4/5	132	23%	195	37%
	6/7	145	16%	206	24%

(Source: GGNHS Board, Health and Well-Being Study 2002 and 1999)

Of those attending groups, etc., a much higher proportion attended groups locally than elsewhere (92% versus 29%).

**Figure 2 Do you attend regularly in your local area and/or elsewhere?**

	2002		1999	
	No.	%	No.	%
Attended locally	323	92%	423	83%
Attended elsewhere	72	29%	116	23%

(Source: GGNHS Board, Health and Well-Being Study 2002 and 1999)

## 1.2 Involvement with voluntary organisations: frequency and intensity of involvement

The data from the 2003-04 Scottish Household Survey showed that just over 20% of Glasgow people aged 16 or above said they had given up time for charity/local groups in the past year. This figure has appeared to stay constant over the past few years.

Scottish Household Survey data are based on a robust base sample and are presented in gender and age groups as well as by the distinction between SIP and non-SIP areas of residence. Further, there is strong confidence that data gathered by the Scottish Household Survey will be updated regularly in future surveys.

**Figure 3 Thinking back over the last 12 months, have you given up any time to help any clubs, charities, campaigns or organisations in an unpaid capacity?**

		2003-04		2001-02	
		Glasgow	Scotland	Glasgow	Scotland
Total		21%	23%	21%	26%
Gender	Male	20%	22%	20%	24%
	Female	22%	25%	22%	27%
Age	16-24	23%	19%	20%	21%
	25-34	20%	20%	22%	25%
	35-44	26%	28%	22%	30%
	45-59	21%	26%	24%	30%
	60-74	20%	25%	19%	26%
	75+	15%	14%	17%	15%
SIP/non SIP	SIP	20%	17%	16%	18%
	non SIP	22%	24%	20%	27%
Base		3,542	28,657	3,581	28,586

(Source: Scottish Household Survey 2003-04 and 2001-02)

## 1.3 Religious/spiritual activity

The 2001 census was the first one to ask questions on religious belief, inviting respondents to identify 'religion of upbringing' and 'current religion'. The 2004 Scottish Social Attitudes survey also enquired into the same issues. The total number of respondents for the Scottish Social Attitudes survey was 1600, so the confidence intervals around the estimates are fairly reliable.

Comparing the two sets of data revealed levels of decline for most of the main religious groupings in Glasgow between 2001 and 2004, while the number who identified themselves as having 'no religion' increased significantly.

**Figure 4 Current religion, Glasgow and Scotland 2004 and 2001 (% of pop)**

	2004		2001	
	Glasgow	Scotland	Glasgow	Scotland
Church of Scotland	25%	29%	32%	42%
Roman Catholic	24%	12%	30%	16%
Other Christian	5%	9%	4%	7%
Muslim	2%	1%	3%	1%
Buddhist	0%	0%	0%	0%
Hindu	0%	0%	0%	0%
Jewish	-	-	0%	0%
Sikh	-	-	0%	0%
Another religion	1%	0%	1%	1%
No religion	43%	47%	23%	28%
Not answered	0%	0%	8%	5%

(Source: Scottish Social Attitudes 2004 conducted by ScotCen and 2001 Census figures)

The Christian Research organisation has been conducting surveys into Christian church practice in Scotland over the last two decades. Their data reveal significant reductions in church attendance in Glasgow for all the main Christian religions (with the exception of the Episcopalians) over the last decade. While 54% of Glaswegians identified themselves as Christian in 2004, looking at the most recent data from Christian Research (2002), only 14% regularly attended church on Sunday (16% in 1994 and 22% in 1984).

**Figure 5 Sunday attendance by denomination in Glasgow, 1994 - 2002**

	2002	1994	% change
Church of Scotland	22,390	29,540	-24%
Other Presbyterian	1,170	1,480	-15%
Episcopalian	1,320	1,240	+6%
Baptist	3,100	3,180	-3%
Independent	4,010	4,620	-13%
Small denominations	2,800	3,370	-17%
Total Protestant	34,790	43,430	-26%
Roman Catholic	47,960	55,530	-14%
Total Christian	82,750	98,960	-19%

(Source: Religious Trends 4 (Christian Research))

**Figure 6 City of Glasgow Christian church attendance, 1984 - 2002**

	2002	1994	1984
Total Population	584,090	615,920	667,740
Usual Sunday Church attendance	82,750	98,960	145,230
% attending on Sunday	14%	16%	22%
Number of churches	400	400	401
Population per church	1,460	1,540	1,670

(Source: Religious Trends 4 (Christian Research))

(n.b. the 2002 Glasgow figs contain data on 4 churches formerly in W. Dunbartonshire and 15 formerly in E. Dunbartonshire)

The above data reveal participation in the public ritual aspects of religion but do not embrace wider spiritual activity, whether that be group-based or individual.

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## 1.4 Networks in the workplace (esp. informal)

Where data on workplace networks are available, it tends to be from organisations' staff/employees surveys. Such surveys are voluntary, private and not public in output, and inconsistent in method. It has therefore not been possible to include this facet in the Social Capital Framework and Assessment.

## 1.5 TV viewing habits

Research in 2003, commissioned by SEG, revealed that overall 94% of Glaswegians spent over 1 hour per day watching TV, and over one quarter (26%) watched more than 5 hours per day. Variations were observed within certain sub-groups:

- just over a third (37%) of unemployed and 33% of retired respondents spent five or more hours watching TV per day compared with 17% of those in employment and 10% of students;
- generally speaking, older people were more likely to spend time watching television than younger people – over a third (35%) of over 55s spent five or more hours per day watching TV compared with just 22% of under 55s;
- those within SIP areas were more likely to have spent time watching TV (35% watched 5+ hours per day) than those in non-SIP areas (21% watched 5+ hours per day).

**Figure 7 How many hours a day do you spend watching TV?**

How many hours a day do you spend watching TV?	Total
Less than one hour	5%
1-2 hours	30%
2-4 hours	38%
5+ hours	26%
Don't know	0%
Do not watch TV	1%

(Source: University of Strathclyde and mruk, 2003)

## 2. Social networks and social support (networks)

### 2.1 Frequency of seeing and speaking to relatives, friends or neighbours

When asked in the GGNHSB Health and Well-being Study if they ever felt isolated from family and friends, 15% of respondents in 2002 said yes. Residents in the most deprived areas were more likely than those in the least deprived areas to say this (18% and 8% respectively). There were no other clear differences by age or gender.

**Figure 8 Do you ever feel isolated from family and friends? (positive responses)**

		2002		1999	
		No.	%	No.	%
Total		262	15%	286	18%
Gender	Male	110	13%	122	16%
	Female	152	16%	164	19%
Age	16-24	34	12%	50	18%
	25-34	56	16%	81	24%
	35-44	60	17%	48	18%
	45-54	39	15%	33	15%
	55-64	31	15%	35	16%
	65-74	22	12%	20	11%
	75+	16	11%	21	15%
Depcat	1/2	27	8%	18	6%
	3/4/5	75	13%	67	14%
	6/7	162	18%	202	24%

(Source: GGNHS Board, Health and Well-Being Study 2002 and 1999)

Scottish Household Survey data revealed that the incidence of believed neighbour disputes affects around 10% of the City's households. This figure has stayed constant over the past few years and shows little difference between gender, age and area of residence.

**Figure 9 How many times, if at all, have you had any disputes or serious problems with neighbours in the past 12 months?**

		2003-04						2001-02					
		Glasgow			Scotland			Glasgow			Scotland		
		Never/ nothing serious	Once	More than once	Never/ nothing serious	Once	More than once	Never/ nothing serious	Once	More than once	Never/ nothing serious	Once	More than once
Total		90%	4%	6%	92%	3%	5%	90%	5%	5%	91%	4%	5%
Gender	Male	90%	5%	5%	93%	3%	4%	89%	5%	4%	91%	4%	5%
	Female	89%	4%	7%	92%	4%	4%	90%	4%	6%	91%	4%	5%
Age	16-24	89%	4%	7%	91%	4%	5%	85%	9%	6%	87%	7%	6%
	25-34	87%	4%	9%	89%	5%	6%	83%	8%	9%	86%	6%	8%
	35-44	84%	7%	9%	89%	5%	6%	87%	5%	8%	89%	5%	6%
	45-59	90%	5%	5%	93%	3%	4%	91%	3%	6%	92%	4%	4%
	60-74	93%	2%	5%	96%	2%	2%	95%	1%	4%	95%	2%	3%
	75+	95%	2%	3%	97%	2%	1%	98%	1%	1%	98%	1%	1%
SIP/non SIP	SIP	88%	4%	8%	89%	4%	7%	88%	5%	7%	87%	5%	8%
	non SIP	90%	5%	5%	93%	3%	4%	93%	3%	4%	92%	4%	4%
Base		3,187			28,693			3,615			28,660		

(Source: Scottish Household Survey 2003-04 and 2001-02)

Glasgow Anti-Racist Alliance and the University of Strathclyde undertook research in 2000 – 2003 which, among other things, identified the number of friends which young people had. The figure commonly given was around six, and this varied little across ethnicities.

**Figure 10 How many close friends do you have?**

Ethnicity	2003		2000	
	Number of friends	Sample size	Number of friends	Sample size
Indian	6.31	29	5.13	31
Pakistani	6.84	55	9.35	75
Diverse	5.67	18	7.22	23
Chinese	5.38	16	8.09	22
White	6.50	44	6.11	84

(Source: Table 7.6, p. 64, 'A Longitudinal Investigation of the Experiences of Racism and Discrimination by Young People in Glasgow' (produced by GARA and Strathclyde University))

## 2.2 Virtual networks: frequency and intensity of contact (degree of e connectivity and use)

In 2003-4, one third of Glaswegians aged 16+ enjoyed domestic internet access (via broadband and dial-up connection) compared to one quarter (24%) in 2001-2. In both years, the figures for Glasgow lagged behind those for Scotland as a whole, but when broadband only connection was considered, Glaswegians were more connected via this advanced technology than Scots as a whole (38% versus 24% in 2003-04). In general, younger age groups enjoyed more domestic internet access than older age groups, and internet access was higher in non-SIP areas than in SIP areas.

**Figure 11 Does your household currently have access to the internet from home? (positive responses)**

		2003-04		2001-02	
		Glasgow	Scotland	Glasgow	Scotland
Total		33%	42%	24%	36%
Gender	Male	37%	45%	28%	40%
	Female	30%	40%	21%	34%
Age	16-24	43%	48%	28%	42%
	25-34	50%	55%	39%	49%
	35-44	50%	61%	40%	55%
	45-59	38%	52%	24%	44%
	60-74	13%	24%	7%	20%
	75+	6%	8%	1%	4%
SIP/non SIP	SIP	22%	26%	15%	21%
	non SIP	40%	45%	0%	0%
Base		3,662	28,681	987	7,697

(Source: Scottish Household Survey 2003-04 and 2001-02)

When asked if they used the internet to send and receive e-mail or visit chat rooms and websites, Glaswegians expressed a marked preference for utilising the internet to send and receive e-mails (87% against 12% in 2003-04).

**Figure 12 Does your household have a Broadband internet connection? Which of these things have you ever used the internet for?**

	2003-04		2001-02	
	Glasgow	Scotland	Glasgow	Scotland
Broadband internet connection at home	38%	24%	14%	10%
Use of internet for chat rooms or sites	12%	11%	20%	13%
Use of internet for email	87%	86%	85%	83%

(Source: Scottish Household Survey 2003-04 and 2001-02)

Glaswegians are also accessing the internet from Community Learning Centres (interactive digital learning suites in Glasgow's public libraries) in increasing numbers. CLC membership has increased steadily from 1,166 in January 2001 to 69,860 in November 2003 (12% of Glasgow's total population). (Source: Newhaven Research report 'Assessing the impact of REAL Community Learning Centres', Feb 2004.)

### 2.3 How many close friends or relatives live nearby who (how many) can be relied on to provide help (and in what circumstances people would ask for help)

The Greater Glasgow Health and Well-being Study asked respondents to state how much they agreed or disagreed with the statement, 'If I have a problem, there is always someone to help me'. The study showed that 75% of the City's 16+ population agreed or strongly agreed with the statement and 8% disagreed or strongly disagreed. The feeling that there was always someone to help increased with the age of the respondent, and more females than males tended to agree with the statement. There was, however, little difference in responses across depcat areas.

**Figure 13 If I have a problem, there is always someone to help me**

		Strongly agree or agree		Neither agree nor disagree		Disagree or strongly disagree	
		No.	%	No.	%	No.	%
Total		1345	75%	309	17%	142	8%
Gender	Male	591	70%	177	21%	75	9%
	Female	754	79%	132	14%	67	7%
Age	16-24	162	59%	91	33%	23	8%
	25-34	229	63%	90	25%	42	12%
	35-44	270	79%	51	15%	23	7%
	45-54	202	78%	34	13%	22	9%
	55-64	178	84%	15	7%	18	9%
	65-74	163	88%	17	9%	5	3%
	75+	129	90%	9	6%	6	4%
Depcat	1/2	252	75%	62	18%	12	7%
	3/4/5	431	76%	98	17%	37	7%
	6/7	663	74%	149	17%	83	9%

(Source: GGNHS Board, Health and Well-Being Study 2002 (no comparable 1999 data))

As noted in Figure 5, 15% of Glaswegians felt isolated from family and friends in 2002 (18% in 1999).

### 2.4 What prevents people from asking for help/engaging (probe transport and accessibility)

*No secondary data sources identified to illuminate this indicator. It was explored in the study's primary research through qualitative method (see next section).*

## 2.5 The degree to which people feel they can be themselves and the degree to which they feel defined by other people

No secondary data sources identified to illuminate this indicator. It was explored in the study's primary research through qualitative method (see next section).

## 2.6 Networks that promote diversity and introduce people to individuals with different perspectives.

No secondary data sources identified to illuminate this indicator. It was explored in the study's primary research through qualitative method (see next section).

## 3. Reciprocity and trust (shared norms and values)

### 3.1 Trust in people who are like you

The Greater Glasgow Health and Well-being Study asked respondents to state how much they agreed or disagreed with the statement, 'This is a neighbourhood where neighbours look out for each other'. The study showed that 67% of the City's 16+ population agreed or strongly agreed that theirs was a neighbourhood where neighbours look out for each other. Fifteen percent disagreed or strongly disagreed with this statement, with 18% expressing no opinion on the issue. The feeling of living in a neighbourhood where neighbours look out for each other rose consistently with the age of the respondent, and females and those living in less deprived areas were more likely to agree with the statement.

**Figure 14 This is a neighbourhood where neighbours look out for each other**

		Strongly agree or agree		Neither agree nor disagree		Disagree or strongly disagree	
		No.	%	No.	%	No.	%
Total		1,193	67%	324	18%	276	15%
Gender	Male	528	63%	169	20%	144	17%
	Female	665	70%	155	16%	132	14%
Age	16-24	135	49%	103	38%	37	14%
	25-34	208	58%	95	26%	58	16%
	35-44	232	67%	43	13%	69	20%
	45-54	183	72%	34	13%	38	15%
	55-64	160	76%	13	6%	38	18%
	65-74	142	77%	24	13%	18	10%
	75+	120	83%	10	7%	14	10%
Depcat	1/2	256	76%	49	15%	32	10%
	3/4/5	405	72%	97	17%	62	11%
	6/7	534	60%	177	20%	183	21%

(Source: GGNHS Board, Health and Well-Being Study 2002 (no comparable 1999 data))

In the same study, respondents were asked how much they agreed or disagreed with the statement, 'Generally speaking, you can trust people in my local area'. Sixty nine percent of people thought that, generally speaking they could trust people in their local area, with 12% disagreeing and 18% equivocal. Again the figure was higher for females, older people and those living in the least deprived areas.



**Figure 15 Generally speaking, you can trust people in my local area**

		Strongly agree or agree		Neither agree nor disagree		Disagree or strongly disagree	
		No.	%	No.	%	No.	%
Total		1,234	69%	350	20%	214	12%
Gender	Male	557	66%	185	22%	102	12%
	Female	677	71%	165	17%	112	12%
Age	16-24	138	50%	102	37%	35	13%
	25-34	195	54%	97	27%	69	19%
	35-44	234	68%	61	18%	48	14%
	45-54	196	76%	34	13%	27	11%
	55-64	172	81%	23	11%	17	8%
	65-74	154	83%	20	11%	11	6%
	75+	126	88%	13	9%	5	4%
Deprat	1/2	278	83%	50	15%	9	3%
	3/4/5	428	76%	109	19%	30	5%
	6/7	527	59%	191	21%	176	20%

(Source: GGNHS Board, Health and Well-Being Study 2002 (no comparable 1999 data))

### 3.2 Trust in other people who are not like you. Willingness to experience diversity in terms of class, ethnicity, race, gender. Willingness to try new and different things. Attitudes towards LGBT and BME communities

This is a broad subject area and one that would benefit from further development. At present, we have identified no secondary data sources to fully illuminate the above. However, a longitudinal study conducted by Glasgow Anti-Racist Alliance and the University of Strathclyde invited a range of young Glaswegians to identify the ethnicity of their friends. The data showed that young white and Pakistani Glaswegians were more likely to have friends from within their own ethnic group than young Glaswegians from other ethnic backgrounds.

**Figure 16 Ethnicity of friends**

	More than 50% of my friends are from a different ethnic group	50% of my friends are from the same ethnic group as me	More than 50% of my friends are from the same ethnic group as me
White	5%	4%	89%
Chinese	55%	18%	26%
Diverse	50%	30%	20%
Pakistani	16%	12%	71%
Indian	47%	13%	38%

(Source: Figure 7.1, p. 66 'A Longitudinal Investigation of the Experiences of Racism and Discrimination by Young People in Glasgow' (produced by GARA and Strathclyde University) (data gathered from 271 respondents in 2000))

### 3.3 People will do favours and vice versa

*No secondary data sources identified to illuminate this indicator. It was explored in the study's primary research through qualitative method (see section 4 of the Report).*

### 3.4 Perception of shared values

The Greater Glasgow Health and Well-being Study asked respondents to state how much they agreed or disagreed with the statement, 'I feel valued as a member of my community'. The study revealed that 55% agreed with the statement while 20% disagreed to some degree. Older people felt more valued in their community than younger people, and residents of less deprived areas were more likely to feel valued than those in deprived areas.

**Figure 17 I feel valued as a member of my community**

		Strongly agree or agree		Neither agree nor disagree		Disagree or strongly disagree	
		No.	%	No.	%	No.	%
Total		973	55%	455	26%	349	20%
Gender	Male	441	52%	220	26%	182	22%
	Female	544	57%	237	25%	171	18%
Age	16-24	91	33%	115	42%	69	25%
	25-34	145	40%	120	33%	95	26%
	35-44	184	54%	83	24%	77	22%
	45-54	161	62%	48	19%	49	19%
	55-64	146	62%	48	19%	49	19%
	65-74	140	76%	28	15%	16	9%
	75+	106	73%	26	18%	13	9%
Depcat	1/2	203	60%	86	25%	49	15%
	3/4/5	336	59%	139	25%	91	16%
	6/7	447	50%	233	26%	214	24%

(Source: GGNHS Board, Health and Well-Being Study 2002 (no comparable 1999 data))

#### 4. Civic participation (co-operation)

##### 4.1 Confidence in institutions at different levels. Are agencies responsive to local interests and needs?

No secondary data sources identified to illuminate this indicator. It was explored in the study's primary research through qualitative method (see section 4 of the Report).

##### 4.2 Perceptions of ability to influence events - access to decision-makers and networks of influence

The Greater Glasgow Health and Well-being Study asked respondents to state how much they agreed or disagreed with the statement, 'By working together, people in my neighbourhood can influence decisions that affect my neighbourhood'. In 2002, 58% agreed with the statement and 16% disagreed with this statement. A higher proportion of residents living in less deprived areas agreed with the statement (68% in depcat 1/2 area, compared with 53% in depcat 6/7 area). Agreement with the statement also increased with the age of the respondent.

**Figure 18 By working together, people in my neighbourhood can influence decisions that affect my neighbourhood**

		Strongly agree or agree		Neither agree nor disagree		Disagree or strongly disagree	
		No.	%	No.	%	No.	%
Total		1,045	58%	471	26%	280	16%
Gender	Male	470	56%	242	29%	132	16%
	Female	575	60%	229	24%	148	16%
Age	16-24	107	39%	119	43%	49	18%
	25-34	185	51%	108	30%	67	19%
	35-44	200	58%	82	24%	62	18%
	45-54	169	66%	49	19%	39	15%
	55-64	143	67%	40	19%	29	14%
	65-74	125	68%	41	22%	18	10%
	75+	104	72%	27	19%	13	9%
Depcat	1/2	229	68%	85	25%	22	7%
	3/4/5	343	61%	138	24%	86	15%
	6/7	473	53%	248	28%	173	19%

(Source: GGNHS Board, Health and Well-Being Study 2002 (no comparable 1999 data))

### 4.3 How well informed about local or national affairs

In 2003, Glasgow City Council's Citizens' Panel asked respondents how much, if anything, they knew about their local council. Overall, 80% of respondents indicated that they knew little or hardly anything about the Council while 20% indicated that they knew a 'great deal' or a 'fair amount'. There was little difference across age and gender, however those in the least deprived areas felt they knew more about their council than those in the more deprived areas (49% of those in deprec 1/2 saying 'a great deal' or 'a fair amount' compared to 24% of those in deprec 6/7 areas).

**Figure 19 How much, if anything, do you know about your local council?**

		A great deal		A fair amount		Just a little		Hardly anything		Don't know/ not stated	
		No.	%	No.	No.	No.	%	%	%	No.	%
Total		35	3%	212	17%	415	33%	591	47%	9	1%
Gender	Male	18	3%	107	18%	206	34%	272	45%	3	1%
	Female	17	3%	105	16%	208	32%	319	49%	6	1%
Age	16-24	1	1%	23	11%	69	34%	109	54%	1	0%
	25-34	7	2%	41	14%	103	36%	135	47%	3	1%
	35-44	10	4%	51	22%	76	32%	97	41%	1	0%
	45-54	7	4%	37	21%	62	35%	71	40%	2	1%
	55-64	6	5%	20	15%	43	33%	60	46%	1	1%
	65-74	4	3%	22	17%	38	29%	67	51%	1	1%
	75+	1	1%	16	17%	24	26%	51	55%	0	0%
Depcat	1/2	3	10%	12	39%	6	19%	10	32%	0	0%
	3/4/5	3	1%	27	23%	48	41%	38	32%	2	2%
	6/7	9	3%	64	21%	96	32%	129	43%	0	0%

(Source: Glasgow City Council Citizens' Panel, MORI (Scotland) 2003)

### 4.4 Contact with public officials, political representatives, City decision makers.

Glasgow City Council's Citizens' Panel asked respondents whether or not they had made contact with their elected councillor in the past 12 months. Overall 88% of respondents had not had any contact with their councillor in the last 12 months, but it is uncertain if this is an indicator of apathy, ignorance or contentment.

**Figure 20 Have you made contact with your local elected councillor in the past 12 months?**

		Yes, for me		Yes, for community		Yes, for some other reason		No, not contacted local councillor		Don't know/ not stated	
		No.	%	No.	No.	No.	%	%	%	No.	%
Total		49	5%	45	4%	18	2%	909	88%	9	1%
Gender	Male	16	3%	20	4%	7	1%	437	90%	4	1%
	Female	33	6%	25	5%	10	2%	472	87%	5	1%
Age	16-24	3	2%	3	2%	0	0%	158	96%	1	1%
	25-34	9	4%	8	4%	3	1%	205	90%	3	1%
	35-44	13	7%	10	6%	6	3%	149	83%	1	1%
	45-54	8	5%	9	6%	3	2%	130	86%	1	1%
	55-64	10	8%	7	6%	3	3%	96	81%	1	1%
	65-74	3	3%	5	4%	2	2%	106	91%	1	1%
	75+	3	4%	4	6%	1	1%	65	89%	0	0%
Depcat	1/2	6	10%	2	3%	1	2%	50	85%	0	0%
	3/4/5	11	4%	7	3%	5	2%	246	91%	2	1%
	6/7	29	5%	29	5%	12	2%	532	88%	7	1%

(Source: Glasgow City Council Citizens' Panel, MORI (Scotland) 2003)

## 4.5 Involvement with local action groups and animation of communities

Scottish Household Survey data show that, of those who give up time for charities, the vast majority tend to support one charity in particular, as opposed to giving support to a range of organisations.

**Figure 21** If you have given up time in the past year, was that for one particular club, charity, campaign or organisations, or more?

		2003-04				2001-02			
		Glasgow		Scotland		Glasgow		Scotland	
		One	More than one	One	More than one	One	More than one	One	More than one
Total		70%	30%	74%	26%	77%	23%	70%	30%
Gender	Male	70%	30%	75%	25%	78%	22%	71%	29%
	Female	70%	30%	74%	26%	76%	24%	69%	31%
Age	16-24	61%	39%	79%	21%	78%	22%	75%	25%
	25-34	64%	36%	78%	22%	78%	22%	75%	25%
	35-44	72%	28%	75%	25%	77%	23%	71%	29%
	45-59	69%	31%	71%	29%	78%	22%	66%	34%
	60-74	75%	25%	71%	29%	72%	28%	69%	31%
	75+	78%	22%	77%	23%	75%	25%	72%	28%
SIP/non SIP	SIP	71%	29%	79%	21%	83%	17%	79%	21%
	non SIP	70%	30%	74%	26%	79%	21%	70%	30%
Base		759		6499		753		7468	

(Source: Scottish Household Survey 2003-04 and 2001-02)

The activities/organisations most likely to receive support from Glaswegians include sports groups, arts and culture organisations and church/religious activities. Glaswegians have shown an apparent increase since 2001-02 in their work with sports activities and arts/culture organisations whereas support for all other types of organisations has apparently stayed constant or declined.

**Figure 22** Thinking about the club, charity, campaign or organisation that you give up most of your time for, what best describes what the organisation does?

	2003-04		2001-02	
	Glasgow	Scotland	Glasgow	Scotland
Sports activities	31%	17%	17%	14%
Arts, culture	18%	6%	7%	4%
Church/religious activities	13%	15%	16%	16%
Activities or organisations working with young people	8%	14%	14%	15%
Working in the area of health	7%	11%	10%	12%
Working with people with disabilities	6%	8%	9%	9%
Working with older people	6%	7%	8%	8%
Working with vulnerable people	5%	4%	7%	5%
Playgroups or other children	5%	7%	5%	7%
Working in support of the environment	3%	2%	4%	1%
Residents/Tenants Groups	2%	2%	5%	3%
Parent/Teacher Association	2%	3%	2%	3%
Working with animals	2%	2%	2%	2%

(Source: Scottish Household Survey 2003-04 and 2001-02)

The type of activity that people were involved in was dominated by those who responded that they provided some kind of service, and this is the only type of activity which has shown an increase since 2001-02.

**Figure 23 What is it that you actually do for that club/charity/campaign/organisation?**

	2003-04		2001-02	
	Glasgow	Scotland	Glasgow	Scotland
Provide some kind of service	74%	64%	62%	58%
Fundraising	19%	38%	32%	43%
Management committee	13%	24%	14%	23%
Help with administration	8%	18%	15%	18%
Help with campaigning	4%	9%	10%	11%
Other	2%	3%	6%	5%

(Source: Scottish Household Survey 2003-04 and 2001-02)

#### 4.6 Frequency and propensity to vote

In the 2005 General Election, just over half (50.2%) of Glaswegians eligible to vote did so. This represented an increase from 46% in 2001 but a significant reduction from 1997 (62%). Constituency results are show below.

Glasgow City Council is also able to supply data for its local elections. This is broken down by Council Ward (population typically between 5,000 and 6,000 per ward). These data are capable of informing of voting behaviour by geographic/social inclusion area but not by age and gender profile.

**Figure 24 Percentage poll in General Elections, 1997-2005**

Constituency	2005 (% poll)	2001 (% poll)	1997 (% poll)
Central	44%	40%	56%
East	48%	47%	62%
North	50%	40%	57%
North East	46%	44%	59%
North West	55%	50%	64%
South	56%	53%	68%
South West	50%	51%	67%
All Glasgow	50%	46%	62%

(Source: Glasgow City Council)

#### 4.7 Perceived control over life

The 1999 and 2002 GGNHS Board, Health and Well-Being Study asked respondents whether they felt in control of major decisions affecting their lives, such as planning a budget, moving house or changing job. The vast majority of residents (95%) said they felt in control of these decisions (82% said definitely and 13% to some extent). There was little difference between areas in terms of the proportion saying they have at least some control. Those living in less deprived areas were, however, more likely to say they are 'definitely' in control (92% in deprecats 1/2 compared to 75% in deprecats 6/7).

**Figure 25 Do you feel in control of decisions that affect your life, such as planning your budget, moving house or changing job?**

		2002						1999					
		Definitely		To some extent		No		Definitely		To some extent		No	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total		1,468	82%	238	13%	92	5%	987	59%	552	33%	137	8%
Gender	Male	692	82%	98	12%	55	7%	482	61%	235	30%	68	8%
	Female	776	81%	140	15%	37	4%	505	57%	317	36%	69	8%
Age	16-24	223	81%	442	15%	10	4%	184	63%	80	28%	27	9%
	25-34	292	81%	48	13%	21	6%	214	61%	97	28%	39	11%
	35-44	291	84%	31	9%	25	7%	153	58%	91	34%	21	8%
	45-54	207	80%	34	13%	17	7%	138	61%	74	33%	14	6%
	55-64	170	81%	34	16%	7	3%	128	57%	80	35%	18	8%
	65-74	155	84%	25	14%	5	3%	104	57%	70	38%	10	5%
	75+	114	79%	22	15%	9	6%	66	48%	62	45%	10	7%
Depcat	1/2	311	92%	22	7%	7	2%	231	79%	58	20%	3	1%
	3/4/5	484	86%	57	10%	25	4%	319	62%	168	32%	31	6%
	6/7	674	75%	159	18%	62	7%	437	50%	327	38%	104	12%

(Source: GGNHS Board, Health and Well-Being Study 2002 and 1999)

#### 4.8 Satisfaction with life

Respondents were shown the faces scale below, and asked to choose the face which best represented their perception of their overall quality of life.



Overall, 85% rated their quality of life positively. In depcat 1/2 areas 95% were positive compared to 79% in depcat 6/7 areas and younger people were more likely to rate their quality of life positively than older people.

**Figure 26 Which face best rates your overall quality of life?**

		2002				1999			
		Not positive		Positive		Not positive		Positive	
		No.	%	No.	%	No.	%	No.	%
Total		264	15%	1,524	85%	274	17%	1,389	84%
Gender	Male	121	14%	722	86%	121	17%	641	83%
	Female	143	15%	802	85%	143	16%	748	84%
Age	16-24	17	6%	257	94%	30	11%	254	89%
	25-34	47	13%	311	87%	58	17%	286	83%
	35-44	50	15%	295	86%	39	15%	223	85%
	45-54	45	18%	212	83%	45	20%	181	80%
	55-64	37	18%	173	82%	52	23%	175	77%
	65-74	32	18%	151	83%	29	16%	153	84%
	75+	34	24%	109	76%	21	15%	116	85%
Depcat	1/2	17	5%	319	95%	14	5%	276	95%
	3/4/5	60	11%	504	89%	46	9%	466	91%
	6/7	189	21%	701	79%	215	25%	646	75%

(Source: GGNHS Board, Health and Well-Being Study 2002 and 1999)

## 5. View of the local area (shared norms and values)

### 5.1 Views of the physical environment

No data on this issue are included. It features as a discretionary dimension of SIP surveys, but is not consistently measured on a city-wide basis. When asked to identify sources of dissatisfaction with their environment in the Scottish Household Survey, the most frequently cited causes of dissatisfaction were rubbish or litter lying around (48% saying very or fairly common) and groups of young people hanging about (46%). Generally speaking, the younger respondents and those living in SIP areas were more likely to cite all of these environmental problems as very or fairly common. The figures reveal very little change between 2001-02 and 2003-04

**Figure 27 How common would you say the following things are in this neighbourhood? (% saying each is very or fairly common)**

#### Noisy neighbours/loud parties

		2003-04		2001-02	
		Glasgow	Scotland	Glasgow	Scotland
Total		12%	8%	13%	8%
Gender	Male	11%	8%	13%	7%
	Female	13%	9%	13%	8%
Age	16-24	16%	13%	18%	13%
	25-34	18%	12%	16%	11%
	35-44	15%	9%	14%	8%
	45-59	11%	7%	15%	6%
	60-74	8%	5%	7%	5%
	75+	5%	4%	7%	4%
SIP/non SIP	SIP	18%	17%	19%	16%
	non SIP	9%	7%	9%	6%
Base		3562	28741	3620	28687

#### Vandalism/ graffiti/ damage to property

		2003-04		2001-02	
		Glasgow	Scotland	Glasgow	Scotland
Total		35%	18%	36%	19%
Gender	Male	34%	18%	36%	19%
	Female	36%	19%	36%	19%
Age	16-24	38%	25%	44%	26%
	25-34	37%	21%	36%	21%
	35-44	36%	18%	41%	21%
	45-59	39%	19%	36%	17%
	60-74	30%	16%	31%	16%
	75+	24%	11%	23%	14%
SIP/non SIP	SIP	50%	40%	47%	41%
	non SIP	27%	15%	29%	15%
Base		3562	28740	3620	28687

**Groups of young people hanging about**

		2003-04		2001-02	
		Glasgow	Scotland	Glasgow	Scotland
Total		46%	31%	46%	32%
Gender	Male	47%	31%	45%	32%
	Female	46%	31%	47%	31%
Age	16-24	53%	42%	55%	44%
	25-34	53%	39%	52%	38%
	35-44	50%	34%	51%	35%
	45-59	48%	31%	49%	29%
	60-74	39%	25%	37%	25%
	75+	30%	17%	26%	18%
SIP/non SIP	SIP	59%	52%	58%	53%
	non SIP	40%	28%	37%	27%
Base		3562	28740	3620	28687

**People drinking or using drugs**

		2003-04		2001-02	
		Glasgow	Scotland	Glasgow	Scotland
Total		35%	23%	34%	22%
Gender	Male	35%	23%	33%	22%
	Female	34%	22%	35%	22%
Age	16-24	45%	33%	45%	34%
	25-34	41%	28%	38%	27%
	35-44	39%	25%	39%	25%
	45-59	36%	23%	35%	21%
	60-74	26%	17%	25%	17%
	75+	19%	11%	16%	12%
SIP/non SIP	SIP	49%	45%	46%	44%
	non SIP	28%	20%	26%	18%
Base		3562	28740	3620	28687

**Rubbish or litter lying around**

		2003-04		2001-02	
		Glasgow	Scotland	Glasgow	Scotland
Total		48%	29%	44%	30%
Gender	Male	46%	28%	45%	29%
	Female	50%	30%	44%	30%
Age	16-24	56%	35%	48%	38%
	25-34	56%	33%	48%	32%
	35-44	49%	29%	49%	31%
	45-59	50%	29%	47%	30%
	60-74	41%	27%	37%	27%
	75+	34%	20%	32%	21%
SIP/non SIP	SIP	57%	48%	52%	48%
	non SIP	43%	26%	36%	26%
Base		3562	28740	3620	28687

(Source: Scottish Household Survey 2003-04 and 2001-02)



The 2002 and 1999 GGNHSB Health and Well-being Study asked respondents about a range of social and environmental issues in their neighbourhood. Respondents were asked their perception of how common a problem each issue was in their neighbourhood. The tables below show the percentage of respondents who said very or fairly common.

In this study, all social issues (where asked) revealed an apparent decline between 1999 and 2002, with unemployment (20% less saying very or fairly common), rubbish lying about (16% less) and burglaries (13% less) revealing the biggest changes and assaults/ muggings revealing the least change (1% less saying very or fairly common).

**Figure 28 How common a problem do you think ..... is in your area? (% saying each is very or fairly common)**

**Social Issues**

		Unemployment		Domestic violence		Burglaries		Vandalism/ Graffiti		Assaults/ Muggings	
		2002	1999	2002	1999	2002	1999	2002	1999	2002	1999
		%	%	%	%	%	%	%	%	%	%
Total		44%	64%	18%	22%	29%	42%	49%	53%	23%	24%
Gender	Male	46%	65%	19%	22%	32%	41%	49%	55%	26%	24%
	Female	42%	62%	17%	22%	27%	42%	49%	52%	21%	25%
Age	16-24	41%	71%	24%	24%	27%	36%	51%	59%	23%	30%
	25-34	51%	65%	23%	26%	41%	45%	56%	56%	32%	23%
	35-44	45%	56%	20%	25%	27%	45%	51%	52%	21%	25%
	45-54	48%	61%	18%	20%	29%	42%	47%	47%	24%	22%
	55-64	50%	73%	14%	19%	35%	46%	53%	55%	22%	25%
	65-74	34%	63%	10%	20%	21%	42%	39%	56%	20%	28%
	75+	26%	49%	6%	14%	15%	30%	32%	38%	15%	16%
Depcat	1/2	15%	26%	4%	13%	21%	46%	24%	47%	5%	16%
	3/4/5	37%	49%	13%	21%	25%	48%	41%	50%	17%	26%
	6/7	59%	85%	26%	26%	35%	37%	64%	57%	34%	26%

		Bullying in schools		Drug activity		Excessive drinking		Young people hanging about		Car crime	
		2002	1999	2002	1999	2002	1999	2002	1999	2002	1999
		%	%	%	%	%	%	%	%	%	%
Total		21%	24%	53%	59%	52%	60%	62%	n/a	38%	n/a
Gender	Male	20%	22%	54%	60%	55%	65%	62%	n/a	39%	n/a
	Female	21%	25%	52%	58%	50%	57%	63%	n/a	37%	n/a
Age	16-24	25%	35%	59%	68%	60%	73%	73%	n/a	40%	n/a
	25-34	27%	27%	61%	67%	63%	70%	69%	n/a	48%	n/a
	35-44	26%	30%	54%	62%	53%	64%	65%	n/a	41%	n/a
	45-54	22%	22%	57%	59%	55%	57%	62%	n/a	41%	n/a
	55-64	17%	16%	52%	56%	51%	56%	58%	n/a	35%	n/a
	65-74	8%	14%	39%	48%	36%	50%	51%	n/a	28%	n/a
	75+	3%	6%	30%	32%	28%	32%	38%	n/a	13%	n/a
Depcat	1/2	21%	33%	34%	42%	33%	38%	42%	n/a	28%	n/a
	3/4/5	16%	28%	43%	51%	41%	51%	56%	n/a	28%	n/a
	6/7	24%	18%	67%	69%	67%	73%	74%	n/a	48%	n/a

(Source: GGNHS Board, Health and Well-Being Study 2002 and 1999)

Three environmental issues were probed in both the 1999 and 2002 surveys (rubbish lying about, noise and disturbance, and poor street lighting) and all revealed considerable declines (e.g. rubbish lying about declined as a problem from 50% to 34%).

## Environmental issues

		Contaminated drinking water		Rubbish lying about		Noise and disturbance		Poor street lighting		Air pollution	
		2002	1999	2002	1999	2002	1999	2002	1999	2002	1999
		%	%	%	%	%	%	%	%	%	%
Total		14%	n/a	34%	50%	23%	32%	9%	16%	15%	n/a
Gender	Male	13%	n/a	33%	52%	24%	35%	10%	14%	16%	n/a
	Female	15%	n/a	35%	48%	22%	30%	9%	17%	15%	n/a
Age	16-24	10%	n/a	33%	64%	23%	36%	7%	19%	18%	n/a
	25-34	16%	n/a	39%	54%	30%	40%	12%	14%	20%	n/a
	35-44	14%	n/a	33%	47%	25%	35%	8%	17%	11%	n/a
	45-54	13%	n/a	36%	40%	21%	28%	15%	13%	19%	n/a
	55-64	18%	n/a	34%	48%	24%	25%	10%	17%	14%	n/a
	65-74	13%	n/a	27%	48%	15%	28%	6%	16%	10%	n/a
	75+	15%	n/a	30%	39%	13%	19%	6%	11%	10%	n/a
	Depcat	1/2	10%	n/a	15%	41%	8%	23%	5%	14%	4%
3/4/5		11%	n/a	26%	46%	15%	24%	7%	16%	12%	n/a
6/7		18%	n/a	46%	55%	34%	39%	13%	17%	22%	n/a

		Vacant/ derelict land		Vacant/ derelict buildings		Dog's dirt		Abandoned cars		Traffic	
		2002	1999	2002	1999	2002	1999	2002	1999	2002	1999
		%	%	%	%	%	%	%	%	%	%
Total		13%	n/a	13%	n/a	49%	n/a	13%	n/a	42%	n/a
Gender	Male	15%	n/a	14%	n/a	48%	n/a	14%	n/a	43%	n/a
	Female	11%	n/a	12%	n/a	49%	n/a	12%	n/a	41%	n/a
Age	16-24	11%	n/a	11%	n/a	47%	n/a	11%	n/a	43%	n/a
	25-34	19%	n/a	18%	n/a	53%	n/a	15%	n/a	46%	n/a
	35-44	15%	n/a	16%	n/a	48%	n/a	17%	n/a	40%	n/a
	45-54	14%	n/a	15%	n/a	54%	n/a	12%	n/a	46%	n/a
	55-64	10%	n/a	9%	n/a	51%	n/a	11%	n/a	44%	n/a
	65-74	10%	n/a	11%	n/a	46%	n/a	11%	n/a	35%	n/a
	75+	3%	n/a	5%	n/a	35%	n/a	6%	n/a	31%	n/a
Depcat	1/2	4%	n/a	4%	n/a	33%	n/a	2%	n/a	32%	n/a
	3/4/5	5%	n/a	5%	n/a	44%	n/a	8%	n/a	38%	n/a
	6/7	22%	n/a	21%	n/a	58%	n/a	19%	n/a	48%	n/a

(Source: GGNHS Board, Health and Well-Being Study 2002 and 1999)

## 5.2 Facilities in the area

The Scottish Household Survey invited respondents to assess the 'convenience of location' of a number of key facilities from their home. Most Glaswegians felt they had good access to a range of key facilities, with the only exception being access to outpatient facilities (66% in 2003-4, down from 72% in 2001-02).

**Figure 29 How convenient or inconvenient would you find it to make use of the following services during their normal opening hours, assuming you needed to? (% finding services very or fairly convenient)**

	2003-04		2001-02	
	Glasgow	Scotland	Glasgow	Scotland
Grocery/food shop	92%	93%	91%	91%
Chemists	90%	89%	89%	87%
Post Office	89%	91%	90%	90%
Public Transport	89%	79%	87%	78%
Doctors	78%	82%	81%	81%
Bank	70%	76%	72%	75%
Outpatients	66%	57%	72%	60%
Base	3,053	27,661	3,614	28,664

(Source: Scottish Household Survey 2003-04 and 2001-02)

### 5.3 Enjoyment of living in the area

Research from the Scottish Household Survey shows that 86% of the City's 16+ population rate their neighbourhood positively as a place to live, although this figure is slightly below that for Scotland as a whole. Enjoyment of living in the area tended to increase slightly with age, and was higher in non SIP areas than in SIP areas.

**Figure 30 Thinking about the neighbourhood you live in, how would you rate it as a place to live?**

		2003-04				2001-02			
		Glasgow		Scotland		Glasgow		Scotland	
		Very/ fairly good	Fairly/ very poor	Very/ fairly good	Fairly/ very poor	Very/ fairly good	Fairly/ very poor	Very/ fairly good	Fairly/ very poor
Total		86%	14%	92%	7%	84%	15%	92%	8%
Gender	Male	86%	13%	92%	7%	85%	15%	92%	7%
	Female	85%	14%	92%	8%	83%	16%	92%	8%
Age	16-24	84%	15%	88%	12%	84%	14%	88%	11%
	25-34	83%	16%	90%	10%	83%	16%	89%	10%
	35-44	84%	16%	92%	8%	79%	21%	91%	9%
	45-59	85%	14%	93%	7%	83%	17%	93%	6%
	60-74	88%	12%	94%	6%	88%	11%	94%	6%
SIP/non SIP	75+	90%	10%	95%	5%	90%	10%	95%	5%
	SIP	77%	22%	79%	20%	75%	24%	77%	22%
non SIP		90%	10%	94%	6%	89%	10%	94%	5%
Base		3562		28745		3620		28687	

(Source: Scottish Household Survey 2003-04 and 2001-02)

In 2004, Glasgow Anti-Racist Alliance and the University of Strathclyde invited young respondents from a range of ethnic groups to rate satisfaction with their neighbourhood on a five point scale (1= dissatisfied, 5 = very satisfied). The general response across a range of ethnic groups was just below 4.

**Figure 31 Satisfaction with neighbourhood (on a 5 point scale)**

Ethnicity	Satisfaction with neighbourhood	Number of respondents
Indian	3.89	18
Pakistani	3.97	59
Diverse	3.89	9
Chinese	3.74	19
White	3.83	41

(Source: Table 7.11, p. 75 'A Longitudinal Investigation of the Experiences of Racism and Discrimination by Young People in Glasgow' (produced by GARA and Strathclyde University)) (data gathered from 146 respondents in 2004)

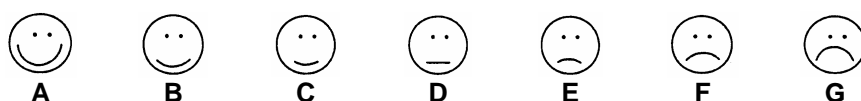
In 2002, 72% of Glasgow residents agreed with the statement 'I feel I belong to this local area' while only 12% disagreed to some degree. This holds up well with the 1999 figures, although women, older people and residents of less deprived areas tended to express stronger feelings of belonging than men, young people and residents of deprived areas respectively.

**Figure 32 I feel I belong to this local area**

		2002						1999					
		Strongly agree or agree		Neither agree nor disagree		Disagree or strongly disagree		Strongly agree or agree		Neither agree nor disagree		Disagree or strongly disagree	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total		1,296	72%	274	15%	223	12%	1,220	73%	184	11%	268	16%
Gender	Male	571	68%	152	18%	118	14%	554	71%	95	12%	130	17%
	Female	725	76%	122	13%	105	11%	666	75%	89	10%	138	16%
Age	16-24	135	49%	101	37%	39	14%	164	57%	39	14%	86	30%
	25-34	220	61%	64	18%	77	21%	211	61%	53	15%	85	24%
	35-44	252	73%	47	14%	45	13%	199	76%	25	10%	37	14%
	45-54	196	77%	24	9%	35	14%	182	81%	25	11%	18	8%
	55-64	182	86%	14	7%	15	7%	185	82%	22	10%	20	9%
	65-74	163	88%	15	8%	7	4%	158	87%	13	7%	11	6%
	75+	133	92%	7	5%	4	3%	121	88%	6	4%	10	7%
Depcat	1/2	261	77%	48	14%	29	9%	235	82%	23	8%	30	10%
	3/4/5	433	77%	81	14%	50	9%	363	71%	100	20%	49	10%
	6/7	602	67%	146	16%	146	16.3%	622	72%	60	7%	188	22%

(Source: GGNHS Board, Health and Well-Being Study 2002 and 1999)

Respondents were shown the faces scale below, and asked to choose the face which best represented their perception of their local area as a place to live.



Overall in 2002, 73% expressed a positive perception (faces A to C) of their local area as a place to live. However, those living in the more deprived areas were far less likely to rate their area positively than those living in less deprived areas (61% giving a positive rating in deprecats 6/7 compared to 92% in deprecats 1/2). There also appears to be a slight decrease in satisfaction since 1999.

**Figure 33 Could you tell me which face on the scale indicates how you feel about your local area as a place to live?**

		2002				1999			
		Not positive		Positive		Not positive		Positive	
		No.	%	No.	%	No.	%	No.	%
Total		486	27%	1,303	73%	354	21%	1,323	79%
Gender	Male	248	30%	593	71%	161	21%	624	80%
	Female	238	25%	710	75%	193	22%	699	78%
Age	16-24	80	29%	195	71%	62	22%	225	73%
	25-34	122	34%	239	66%	96	27%	255	78%
	35-44	105	30%	240	70%	60	23%	207	80%
	45-54	59	23%	194	77%	46	20%	179	79%
	55-64	51	24%	160	76%	47	21%	178	79%
	65-74	43	23%	141	77%	30	16%	155	84%
	75+	25	18%	118	83%	13	10%	123	90%
Depcat	1/2	28	8%	311	92%	17	6%	271	94%
	3/4/5	114	20%	450	80%	43	8%	480	92%
	6/7	345	39%	541	61%	294	34%	573	66%

(Source: GGNHS Board, Health and Well-Being Study 2002 and 1999)

The source has the benefit of trend capability – the third Glasgow Health and Well-being Study is about to be commissioned.

## 5.4 Fear of crime

The 2002 Greater Glasgow Health and Well-being Study asked respondents if they felt safe in their own home. Ninety three percent of respondents agreed with this statement, with only 2% disagreeing (5% remained neutral).

**Figure 34 I feel safe in my own home**

		Strongly agree or agree		Neither agree nor disagree		Disagree or strongly disagree	
		No.	%	No.	%	No.	%
Total		1,674	93%	93	5%	31	2%
Gender	Male	772	91%	60	7%	13	2%
	Female	902	95%	33	4%	18	2%
Age	16-24	253	92%	17	6%	5	2%
	25-34	322	89%	31	9%	8	2%
	35-44	318	92%	22	6%	7	2%
	45-54	249	97%	5	2%	3	1%
	55-64	203	96%	5	2%	4	2%
	65-74	176	95%	7	4%	2	1%
	75+	137	95%	7	5%	1	1%
Depcat	1/2	317	94%	21	6%	1	0%
	3/4/5	523	92%	30	5%	14	3%
	6/7	836	94%	42	5%	16	2%

(Source: GGNHS Board, Health and Well-Being Study 2002 (no comparable 1999 data))

A similar question asked by the Scottish Household Survey produced comparable results.

**Figure 35 How safe do you feel when you are alone in your home at night?**

		2003-04						2001-02					
		Glasgow			Scotland			Glasgow			Scotland		
		Very/ fairly safe	A bit/ very unsafe	Don't know	Very/ fairly safe	A bit/ very unsafe	Don't know	Very/ fairly safe	A bit/ very unsafe	Don't know	Very/ fairly safe	A bit/ very unsafe	Don't know
Total		95%	4%	0%	96%	3%	0%	95%	4%	1%	96%	4%	0%
Gender	Male	97%	3%	0%	98%	2%	0%	97%	3%	1%	98%	2%	0%
	Female	94%	5%	0%	95%	5%	0%	94%	5%	1%	94%	5%	0%
Age	16-24	93%	7%	0%	94%	6%	0%	95%	5%	0%	94%	6%	0%
	25-34	96%	4%	0%	96%	4%	0%	94%	6%	0%	95%	5%	0%
	35-44	96%	3%	0%	97%	3%	0%	97%	3%	0%	97%	3%	0%
	45-59	96%	4%	0%	97%	3%	0%	94%	5%	1%	97%	3%	0%
	60-74	96%	4%	0%	97%	3%	0%	96%	4%	1%	96%	3%	1%
	75+	94%	5%	0%	96%	3%	0%	93%	4%	3%	94%	5%	1%
SIP/non SIP	SIP	94%	6%	0%	94%	6%	0%	93%	6%	1%	93%	7%	0%
	non SIP	96%	3%	0%	97%	3%	0%	0%	0%	0%	0%	0%	0%
Base		3562			28739			1773			14043		

(Source: Scottish Household Survey 2003-04 and 2001-02)

In the 2002 GGNHSB Health and Well-being Study, 62% agreed with the statement 'I feel safe walking around the area even after dark', though 21% said they disagreed or strongly disagreed with the statement. Residents of affluent areas felt safer than residents of deprived areas.

**Figure 36 I feel safe walking alone around this local area even after dark**

		2002						1999					
		Strongly agree or agree		Neither agree nor disagree		Disagree or strongly disagree		Strongly agree or agree		Neither agree nor disagree		Disagree or strongly disagree	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total		1,116	62%	294	16%	385	21%	880	53%	242	15%	550	33%
Gender	Male	528	70%	139	17%	117	14%	543	70%	84	11%	153	20%
	Female	588	56%	155	16%	268	28%	337	38%	158	18%	397	45%
Age	16-24	177	64%	52	19%	46	17%	150	52%	38	13%	101	35%
	25-34	222	62%	65	18%	74	21%	189	54%	45	13%	115	33%
	35-44	218	64%	42	12%	83	24%	150	57%	40	15%	73	28%
	45-54	178	69%	32	12%	48	19%	126	56%	30	13%	69	31%
	55-64	127	61%	35	17%	48	23%	135	60%	26	12%	66	29%
	65-74	115	62%	30	16%	40	22%	84	46%	33	18%	66	36%
	75+	66	46%	37	26%	41	29%	46	34%	30	22%	61	45%
Depcat	1/2	233	69%	60	18%	43	13%	214	74%	35	12%	39	14%
	3/4/5	364	64%	105	19%	97	17%	262	51%	91	18%	161	31%
	6/7	520	58%	128	14%	246	28%	404	46%	116	13%	351	40%

(Source: GGNHS Board, Health and Well-Being Study 2002 and 1999)

Again a similar question was asked in the Scottish Household Survey.

**Figure 37 How safe do you feel walking alone in your neighbourhood after dark?**

		2003-04						2001-02					
		Glasgow			Scotland			Glasgow			Scotland		
		Very/ fairly safe	A bit/ very unsafe	Don't know	Very/ fairly safe	A bit/ very unsafe	Don't know	Very/ fairly safe	A bit/ very unsafe	Don't know	Very/ fairly safe	A bit/ very unsafe	Don't know
Total		63%	32%	0%	73%	23%	0%	63%	33%	5%	72%	24%	4%
Gender	Male	72%	24%	0%	85%	13%	0%	73%	22%	4%	84%	13%	3%
	Female	55%	39%	0%	64%	31%	0%	53%	42%	5%	63%	33%	5%
Age	16-24	64%	35%	0%	75%	25%	0%	73%	26%	2%	76%	23%	1%
	25-34	71%	28%	0%	79%	20%	0%	70%	30%	0%	77%	22%	1%
	35-44	72%	26%	0%	80%	18%	0%	69%	28%	2%	77%	21%	1%
	45-59	67%	30%	0%	77%	21%	0%	70%	27%	4%	77%	21%	2%
	60-74	52%	40%	0%	67%	27%	0%	46%	45%	9%	64%	29%	6%
	75+	40%	39%	0%	51%	31%	0%	36%	49%	14%	50%	34%	16%
SIP/non SIP	SIP	55%	39%	0%	59%	36%	0%	54%	40%	6%	58%	38%	4%
	non SIP	66%	29%	0%	75%	21%	0%	0%	0%	0%	0%	0%	0%
Base		3562			28739			1773			14043		

(Source: Scottish Household Survey 2003-04 and 2001-02)

Again, the results are broadly comparable to those gathered by the GGNHSB Health and Well-being Study.

## 6. Summary of secondary data analysis

Drawing general conclusions from the secondary data is difficult. The data were derived from a range of sources and they do not easily or consistently allow comparison of social capital measures over time, nor do they permit consistent comparison between social capital measures for Glasgow and the rest of Scotland. Finally, some social capital indicators are extremely ambiguous. For example, 88% of Glaswegians reported very little contact with their local councillor during 2003 (Dimension 4.4) but this could either indicate complete contentment with their neighbourhood or feelings of disconnection from the political process. Nonetheless, some general conclusions may be drawn from the secondary data which can stimulate further debate and these are outlined below.

### 6.1 Positives

Glaswegians reported significant levels of social capital with regard to Dimension 2 of the framework (social networks and social support) and Dimension 5 (view of the local area).

In Dimension 2.1 (frequency of seeing and speaking to relatives, friends or neighbours), Glasgow's social capital increased between 1999 and 2002. Eighteen per cent of Glaswegians reported occasional feelings of isolation from family and friends in 1999, but this had declined to 15% by 2002. Furthermore, in 2002, 75% of Glaswegians agreed or strongly agreed with the statement 'If I have a problem, there is always someone to help me' (8% disagreed to some extent) (Dimension 2.3)

Many Glaswegians also articulated strong feelings of identification and satisfaction with their neighbourhood, and this is most evident with regard to Dimension 3.1 (Trust in people who are like you) and various aspects of Dimension 5 (view of the local area).

In 2002, two-thirds of Glaswegians said they lived in a neighbourhood where neighbours 'look out for each other' (Dimension 3.1), while 69% agreed with the statement 'generally speaking, you can trust people in my local area' (Dimension 3.1).

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With regard to Dimension 5 (view of the local area), 86% of Glaswegians rated their neighbourhood as a good or fairly good place to live in 2003- 04, an increase of 2% over 2001-2002 (Dimension 5.1).

In 2002, 72% of Glaswegians agreed or strongly agreed with the statement 'I feel I belong to this local area' (Dimension 5.3) while, in the same year, 93% of Glaswegians said they felt safe in their own home (2% unsafe) (Dimension 5.4).

Finally, Glaswegians reported increasing feelings of control over their own lives (Dimension 4.7). In 1999, 59% of Glaswegians said they definitely felt in control of major decisions affecting their lives (e.g. budgeting, moving house, changing jobs etc) but this figure had risen to 82% by 2002.

## **6.2 Negatives**

The positives of Glasgow's Social Capital Framework and Assessment are balanced by some areas where the city 'could do better'.

Although Glaswegians reported positive scores for Dimension 2 (social networks and social support), their results for Dimension 1 (social participation) are less impressive. This is evident in several facets.

In Dimension 1.1 (number of cultural, social and leisure groups belonged to) only 20% of Glaswegians indicated that they belonged to social clubs, associations or church groups in 2002 and this represents a decline from 30% in 1999. This was mirrored by the responses for Dimension 1.2 (involvement with voluntary organisations) for 2003- 2004 in which only 21% Glaswegians reported that they had given up any time over the preceding 12 months to help any clubs, charities, campaigns or organisations in an unpaid capacity.

This withdrawal from collective activity is further evident with reference to membership and participation in religious organisations (Dimension 1.3). The figures from the 2004 Scottish Social Attitudes Survey and the 2001 Census reveal that the number of Glaswegians who identified themselves as Church of Scotland, Roman Catholic or Muslim (the city's three principal religions) declined dramatically between these two dates. According to figures from the Christian Research organisation, 22% of Glaswegians regularly attended churches on Sunday in 1984 but by 1994 this figure had declined to 16% and by 2002 it was down to 14%.

At the same time as they retreated from social participation, Glaswegians also appeared to withdraw from civic participation (Dimension 4).

Under Dimension 4.2 (perception of ability to influence events), only 58% of Glaswegians agreed with the statement 'by working together, people in my neighbourhood can influence decisions that affect my neighbourhood' in 2002.

In 2003, 80% of Glaswegians said that they knew little or hardly anything about the workings of Glasgow City Council (Dimension 4.3) while only 50% of eligible Glaswegians voted in the 2005 General Election (Dimension 4.6). These figures suggest a level of disconnection from conventional electoral politics which is not being replaced or compensated through increased involvement in other organisations. Glaswegians appear to be 'withdrawing from public life.'

Two other negatives are worth noting at this point.

Although many Glaswegians articulated positive feelings towards their local neighbourhood (Dimension 5) their feelings of satisfaction appear to lag behind the figures articulated by Scots as a whole.



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For example, in 2003-04, 48% of Glaswegians cited 'rubbish or litter lying around' as fairly common or very common features of their neighbourhood while the comparable figure for Scotland as a whole was 29% (Dimension 5.1).

In 2003-04, 35% of Glaswegians cited vandalism, graffiti and damage to property as fairly common or very common features of their neighbourhood while the comparable figure for Scotland was 18% (Dimension 5.1).

Finally, in 2003-04, 63% of Glaswegians reported feeling very or fairly safe while walking alone in their neighbourhood after dark (Dimension 5.4) but the comparable figure for Scotland was 73%.

Glaswegians may feel very fond of their 'dear green place' but they have some way to go before their satisfaction levels match those expressed by Scots in other parts of the country.

### **6.3 Gender**

A number of measures compared feelings of social capital expressed by men and women but, on the whole, no significant differences were recorded by gender. If anything, women appeared to have slightly higher levels of social capital in a number of areas.

In Dimension 2.3 (help from relatives or friends), 79% of women agreed or strongly agreed with the statement 'If I have a problem, there is always someone to help me' while the comparable male figure was 70%.

Women also appear to have more 'trust in people who are like you' (Dimension 3.1). In 2002, 70% of female respondents agreed or strongly agreed with the statement 'this is a neighbourhood where neighbours look out for each other' while only 63% of males expressed the same view.

Finally, women recorded higher scores for some aspects of Dimension 5.3 (enjoyment of living in the area). In 2002, 76% of women agreed or strongly agreed with the statement 'I feel I belong to this local area' while the comparable male figure was 68%.

### **6.4 Age**

While there were only minimal variations in social capital by gender, the evidence suggests that social capital increases markedly with age. This appears to be the case with regard to six indicators (Dimensions 1.1, 3.1, 3.4, 4.2, 5.1, 5.3) and only on one occasion (Dimension 4.8 – satisfaction with life) did younger Glaswegians appear to enjoy more social capital than their older fellow citizens. Three areas in which older Glaswegians enjoyed markedly more social capital than younger residents include the following.

- Dimension 3.4 (Perception of shared values): in 2002, 73% of Glaswegians aged 75+ agreed or strongly agreed with the statement 'I feel valued as a member of my community'; the comparable figure for 16- 24 year olds was 33%.
- Dimension 4.2 (Perception of ability to influence events): in 2002, 72% of Glaswegians aged 75+ agreed or strongly agreed with the statement 'by working together, people in my neighbourhood can influence decisions that can affect my neighbourhood'; the comparable figure for 16- 24 year olds was 39%.
- Dimension 5.3 (Enjoyment of living in the area): in 2003-04, 92% of Glaswegians aged 75+ agreed or strongly agreed with the statement 'I feel I belong to this local area'; the comparable figure for 16- 24 year olds was 49%.

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Older people clearly feel greater belonging and identification with their home neighbourhood than younger people. This could be because they have been settled longer in an area (and have strong networks of friends and acquaintances) or because, over time, they have settled in a neighbourhood which meets most of their needs.

## **6.5 Deprivation**

Just as older Glaswegians appear to enjoy significantly more social capital than younger citizens, residents of socially deprived areas enjoy much lower levels of social capital than Glaswegians who live in more affluent areas. This was evident in 12 areas of the Social Capital Framework and Assessment (Dimensions 1.1, 1.5, 2.1, 3.1, 3.4, 4.2, 4.3, 4.7, 4.8, 5.1, 5.3 and 5.4). A few sample figures illustrate this strong trend.

- Dimension 3.1 (trust in people who are like you): in 2002, 59% of Glaswegians in deprecated areas 6/7 agreed or strongly agreed with the statement 'generally speaking, you can trust people in my local area'; for residents of deprecated areas 1/2, the figure rose to 83%.
- Dimension 4.3 (how well informed about local or national affairs): in 2003, 24% of Glaswegians in deprecated areas 6/7 said they knew a great deal or a fair amount about their local council; the comparable figure for deprecated areas 1/2 was 49%.
- Dimension 4.8 (satisfaction with life): in 2002, 21% of residents of deprecated areas 6/7 rated their overall quality of life as not positive; only 5% of residents of deprecated areas 1/2 rated their overall quality of life in the same way.

Reasons for these differences are not difficult to identify – residents of socially deprived areas generally enjoy lower incomes, higher unemployment levels, poorer housing and lower educational attainment than residents of more affluent areas. These considerations impact heavily on social capital and should be of great concern to policy makers in the future.

The themes explored in the secondary data are examined further in the primary data and any contrasts or similarities between the two sets of evidence are highlighted at the beginning of Section 5 – Next Steps.

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## 4 Primary research

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This section details the findings from the primary research which was undertaken to supplement the secondary data. We consulted with a wide range of Glasgow citizens and with representatives of Glasgow organisations with a vested interest in social capital. Section 4 contains two parts - part one presents the views of Glasgow's citizens, part two presents the views articulated by Glasgow's organisational representatives.

### 4.1 Glasgow Citizens

#### 4.1.1 Friendships and support

##### Who can you rely on to help you?

The most popular sources of support identified by focus groups (in descending order) were family, friends, neighbours, community and miscellaneous organisations.

##### **Family**

Focus groups containing young males, young females, less affluent and mid-affluent males, affluent and mid-affluent females, BME males and females and older people identified the family as the prime (or equal first) source of practical and emotional support. This reinforces the evidence presented in the secondary data analysis that Glasgow has high levels of social support with regard to Dimension 2.1 and 2.2.

Comments indicating the importance of family support included the following.

*"I would turn to my son first because he's just over the road from me which is handy."*

*"Family first, friends, closest friends first. Depends on the sort of help you need."*

Some young males looked to their mothers for support while some young females viewed their sister as a strong source of support.

*"It depends how well you get on with your parents. I'd go to my sister because I'm closer to her than my parents."*

##### **Friends**

Members of the young male, BME male and less affluent male groups indicated that they would turn to friends for support as readily as they would turn to family members. Older females indicated that they would turn to friends for support as a close second to immediate family. Friends were valued as sources of support because they were considered to be less judgemental than family members. This view was strongly expressed by members of the mid-affluent female group.

*"Friends are more reliable than the family. Plus family give you a lecture... you ask for a fiver and they say 'when are you giving it us back, what day, what time?' And I think they can keep their fluffin' fiver."*

*"You can sit and talk to your friends if you've done something wrong, you're more likely to go to your friends as they don't judge you."*

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## **Neighbours**

Focus groups expressed divergent opinions on the importance of neighbours as potential sources of support. Some focus groups (older women, less affluent and mid-affluent females) identified neighbours as strong providers of support.

*"My neighbours have my keys and attend to my house if I'm not there so we both keep in touch with each other."*

*"My neighbours would definitely be who I'd go to, because my neighbours are brilliant but my family live far away and they aren't interested. I know and trust my neighbours and they are willing to help and they offer to."*

The willingness of females to look to neighbours for support strongly echoes aspects of the secondary data, e.g. Dimension 2.3 and 5.3.

At the same time, young males and members of the LGBT community indicated extreme reluctance to consider neighbours as sources of support.

*"If you had family problems, you wouldn't want to go and tell your neighbours about it. You'd try and resolve it yourself, it's none of their business."*

*"I'd be too proud to tell my neighbours I needed help and that, I'd rather just keep it to family."*

These comments reinforce the view that young males tend to have low social capital and limited feelings of identification with their home neighbourhood. The views of the LGBT community were not explicitly covered by the extant secondary data.

Affluent females expressed mixed views on the role of neighbours as sources of support. One group member enjoyed a strong and supportive relationship with her neighbour.

*"She's talking about moving and, quite honestly, I'm dreading it. She's my neighbour, my friend, my shoulder to cry on and my support."*

Other affluent females yearned for good neighbours but felt that the work-life balance in affluent communities militated against the development of neighbourliness. Some felt that they didn't have the time or energy to become involved in neighbourhood or community issues on returning home from work. Significantly, the affluent female who enjoyed a strong relationship with her neighbour had given up full-time work and felt that the benefits (time to speak with neighbours etc) outweighed the disadvantages (reduced income).

## **Miscellaneous organisations**

LGBT group members looked to the wider non-geographical LGBT community for help and support. Continuing homophobia discouraged them from turning to family or neighbours for support and they looked to people with similar or related sexual preferences for assistance.

*"A lot of people like us can't go to their mum and dad for help, it depends on the issue."*

*"Speaking to helplines helps because they are in confidence and they can't go back to your family and friends and say 'oh she said this or the other'."*

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This testimony confirms the secondary data analysis that Glaswegians often trust people similar to themselves (Dimension 3.1) i.e. they have considerable bonding social capital but lower bridging social capital.

BME female focus group members also viewed ethnic minority organisations as excellent sources of support and means of overcoming the isolation and prejudice they occasionally encounter.

Other group members identified other sources of support. Two affluent females and one young female identified the church as a positive source of support. Affluent females also identified organisations created to assist new or expectant mothers as strong sources of support.

*“As a new mother, the statutory health visitor is very helpful, and you can also join networks connected with childbirth that can be very helpful in getting in contact with people in the same situation as yourself. Pre- and post-natal classes give a lot of support to mothers.”*

Members of this group also distinguished between ‘practical support’ and ‘emotional support’ and the groups most likely to provide these forms of support.

*“Colleagues through work can also provide a lot of help. It may be on slightly different issues, e.g. buying a dishwasher.”*

Workmates and neighbours might provide help with practical issues while family would provide support on emotional issues, *“even if they are on the other end of the phone.”*

Affluent male focus group members also looked to work and business contacts as sources of support. One group member referred to the many trades and professional people he could turn to for support (e.g. solicitors, estate agents) and other group members looked beyond the immediate family for support.

*“Social things like the PTA, religious places - you make contacts here, these might not be people you normally run into socially, but you see them every Sunday or regularly, and they have networks that you can tap into.”*

Some groups stressed the importance of children in building strong neighbourhoods and communities.

*“For example, my children, when they play outside, they get a friend, and their friends want to come with my son and daughter to my house, and through this I get to be friends with their mothers and father - now they believe me, they know about my life, about inside my house, my character, how I am.”*

#### **4.1.2 In what circumstances would you ask for help?**

Most focus group members said they would seek assistance in situations where they could not deal with an issue using their own resources. The most commonly cited examples were medical emergencies, housing crises and practical problems requiring specialist help.

*“Say something happened through the night, an emergency, you would run for your neighbour... you would run for the nearest person.”*

*“In an emergency I would ask a neighbour if I needed it very quickly – the nearest person.”*

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Some group members attached caveats to the circumstances in which they would seek help and the groups or individuals they would approach for assistance.

*"It depends on the problem. If it was financial you'd go to your parents, if it was emotional you'd go to your friends."*

*"You can go to mum and dad for finance issues, but for talking about coming out issues you need to talk to someone like Glasgow Gay/Lesbian switchboard or come here as well."*

Contributors' responses indicated a strong overall desire for self-reliance and independence which coloured their responses to the circumstances in which they would not seek help.

#### **4.1.3 In what circumstances would you not ask for help?**

Focus group members identified four circumstances in which they would be reluctant to seek help. Many focus group members expressed reluctance to ask for help when they faced significant marital or relationship problems. Young males and less affluent males were particularly reluctant to look for help in this area.

*"Partner-related issues are very difficult to discuss with your family or friends. That can be quite tricky. If your partner is known to your family and friends and you go and discuss issues about them, you can feel you're dividing things."*

Many group members displayed reluctance to seek help with health issues, especially sexual health issues where the concept of 'shame' was invoked.

*"Most people here wouldn't speak to their family if it was something they were ashamed of, e.g. money problems or sexual health problems. If you felt your family would disapprove of or be ashamed about [these issues], you wouldn't want to speak to your family about them."*

Although young males would not seek family help on these issues, they did express a willingness to turn to medical experts and friends as an alternative.

The reluctance of affluent females to seek help on sexual health issues was identified as a generational issue.

*"In the old days, people were mortified if they had any contact or knowledge about STDs. In today's generation, they're much more blasé about it... they think its perfectly acceptable to go and see a doctor and tell them they've had 25 partners of various different species and... there's no embarrassment or anything else."*

BME males and females also expressed strong disinclination to discuss health issues with family members. BME females indicated a preference to discuss these issues with specialists, while BME males said they would turn to friends for help and advice.

Seeking help over monetary issues was also linked to the notion of shame and a determination to retain independence. Young males, affluent females and older women expressed strong resistance to seeking help with monetary concerns.

*"You have a desire to stand on your own two feet, you have some pride. We need to do better than this."*

At the same time, some older women recognised that an excessive desire for independence could, in itself, be harmful.

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*“Yes, we’re all a bit independent. Sometimes it’s a good thing, sometimes its not. Being too independent can be a mistake as well.”*

In contrast, BME males and less affluent females displayed a greater willingness to openly request help with monetary issues.

*“For money, even though we live all across Scotland we pick up the phone and sometimes I’ll borrow money and sometimes my mum’ll borrow money and we just wire it.”*

Contributors were also reluctant to ask for help in situations where the matter was trivial or where the request for assistance would place an undue burden on the probable source of help. This view was articulated by older women and by BME males.

*“You wouldn’t go through and disturb your neighbours during the night for nothing... I’m talking about medical emergencies or something [before I would ask for help].”*

BME males also indicated a desire to avoid placing undue burdens on elderly parents. In such cases, they would look to family members (e.g. cousins) to provide assistance.

#### **4.1.4 How nearby are those people you could/would ask for help?**

Reinforcing the clear findings of the secondary data (Dimensions 2.1, 2.3, 3.1), a majority of focus groups indicated that likely sources of support lived quite close to hand. Groups expressing this view included young males, young females, older females, less affluent females and mid-affluent females.

BME females and affluent females were evenly divided on this issue. Some BME females indicated that they would look to family and friends in the local neighbourhood for support, while others looked to specialised BME female projects for support.

Some affluent females looked to neighbours to provide assistance while others indicated that they would turn to family and friends for assistance even though they lived some distance away. The geographical remoteness of source of help was linked to changing marital patterns, while modern telecommunications (phone, email) often allowed family members to remain in close contact, even when geographically distant.

*“Families are more spread out now but telecommunications are so much better. I just lift up the phone and I know I can rely on help.”*

Young male focus group members with experience of tertiary education also indicated that many close friends lived some distance away, and they used phone or email to remain in contact.

Continuing homophobia and prejudice compelled many LGBT members to travel considerable distances to access support networks provided by specialist LGBT organisations.

*“Sometimes if you live in a rural community you come here to this centre because you feel safer here than in your home town because you might be recognised there as different or gay. People feel safer travelling here to get the support and friendship - it’s a stepping stone for some people.”*

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#### 4.1.5 Personal belonging

##### To what degree do you feel you fit in with where you live and why do you say that?

Primary research suggests that older females and less affluent females experience strong feelings of belonging to their home area and this mirrors some key aspects of the secondary data analysis.

*"I often say, even if I had a lottery win, I wouldn't leave here... who's wanting to go in amongst all the half-boiled toffs?"*

*"I sit out and talk with my neighbour. We often all go into the one garden and we'll have a wee drink together."*

Interestingly, young male focus group members articulated strong feelings of belonging to their neighbourhood (if not their neighbours) even if this contradicted some aspects of the secondary data. One young man had moved to Inverness for family and career reasons and felt strongly alienated from his new environment.

*"I feel stupid where I stay and I don't like it. Nobody wears trackies. When you're wearing a trackie [in Inverness], you feel as if everybody's staring at you. The boys up there have got different interests... half my pals up there are lassies."*

To remedy this feeling of alienation, the contributor regularly travelled to Glasgow to meet up with friends and other family members.

Members of the affluent and mid-affluent female groups articulated considerable feelings of alienation from their home neighbourhood, something which contradicts evidence presented in the secondary data.

*"If I could lift my house and put it somewhere else, I would move because there's no community spirit. People just want a west end pad. They work outside the area and just come back to their pad to sleep."*

*"The lady up the stair I have thought maybe she's deaf or blind cos she cannae see me. I've said hiya and you get nothing, she just closes her door."*

BME and LGBT group members expressed considerable feelings of alienation from their Glasgow home community and this was attributed to continuing racism and homophobia in Scottish society.

*"I don't think anyone who's not white will ever fit into Glasgow. I live in quite a mixed area (Garnethill) but no matter how much we put into the community, we don't fit in."*

*"Where I live now I live with my female partner and my son, and we are very much 'out', but the place we lived before; my son can't go out to play because we are lesbians, he got beaten up. We had to move because we were felt to not fit in."*

Many BME community members had made conscious attempts to fit into their local community and had been rebuffed.

*"I have a neighbour, and when I come out of my front door and she comes out of her front door both of us are facing each other and we can open the door at the same time and she won't even smile at me – I just*



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*think that's the height of ignorance. They have been here longer and they think they own the place!"*

Some LGBT group members suggested that feelings of prejudice were most strongly entrenched in less affluent areas.

*"The area had a lot of poverty and social problems, we are different and so that's why we were targeted."*

Feelings of racial animosity were so deeply entrenched in some parts of Glasgow that younger BME community members were expressing open feelings of antagonism towards members of the host community.

*"Where I stay now is full of Asian people, Indians and that. My younger brother and sister are fully Scottish, and I don't feel so bad because I'm Scottish Chinese, but when my brother and sister walk along they get abuse because they are white. They're constantly being told to go back to their own part of the country because 'this is our [non-white] bit of Glasgow'."*

Some disability focus group members felt alienated from Glasgow because the city had made little effort to accommodate their special needs.

*"Every time I want to do something locally I have to bang on the fire door and go through a grotty bit in my wheelchair, whereas other people can walk through the nice front gates. What message is that giving as to how disabled people are valued in the community?"*

However, some disability group members felt strongly appreciated and valued in their neighbourhood.

*"I'm 100% included in the community, everyone is very supportive. When I'm at the bus stop in the rain they shout to me 'want to get that jacket zipped up wee man' and I say 'okay!'."*

### **How important is it to you to feel you fit in with where you live?**

With some notable exceptions, the vast majority of focus group members believed that fitting in was extremely beneficial to individual and familial well-being. Comments illustrating this belief include the following.

*"(Fitting in is) crucial isn't it, you spend x amount of money on a house, the biggest thing you are ever going to buy, and it has to be in the right place where you feel comfortable."*

*"You've got to feel like you fit in, otherwise you get a feeling of isolation."*

Fitting in was identified as extremely important from the viewpoint of children and some group members had made considerable sacrifices to benefit their children.

*"[It's a] complicated decision where you go because different parts of the family have different needs. For example, my decision to move here was motivated by my children's needs, it's more important that they are happy and fit in than I do, I perceive their needs as greater."*

Some group members felt that fitting in was more important in certain points of an individual's life than others.

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*"I think it's important when you're younger, but once you've left school and you're going to be moving out and going to Uni or moving away, I don't think it's so important."*

LGBT group members expressed mixed views on this issue. Some older group members were very keen to fit in and be accepted, while younger group members placed a lower premium on fitting in.

*"It's important you are accepted as part of the community because if you get crap when you come out of the door, like people giving abuse and that, then your mental health will suffer."*

*"I don't think it's easy to fit in, but I don't mind being different, I like it."*

Although the majority of focus group members placed a strong value on the idea of fitting in, a small but vocal majority of group members rejected the ideal of community.

*"I don't feel particularly part of my community, but this doesn't bother me... I don't feel any particular sense of belonging, and that's okay. It's because it's a city – there are transient relationships."*

*"I've got five neighbours and me. I don't want to get to know them.... I'll be polite and speak about the weather, but I don't have any bond with them... I wouldn't go to my neighbour's funeral if he died."*

Finally, many disability focus group members wanted to fit into their home community but society's reluctance to accommodate the interests of wheelchair users made this difficult.

*"It's very important to fit in, but I don't."*

#### **4.1.6 Involvement**

##### **How much involvement or contact do you have with people who are different to you?**

The majority of the thirteen focus groups indicated that they had significant contact with people whom they regarded as different from themselves and this contact often occurred through employment and education.

*"In my office I work with 18 year olds and people from other countries. Socially you might meet some folk but mostly it's through work."*

*"When you go to work, you've got to learn to mix with different sorts of people. There's never going to be just one type of person at your work."*

Two groups experienced minimal or limited contact with different people. BME females indicated that they tended to meet women from the same or other ethnic minority backgrounds, while less affluent females also tended to meet people from the same community and same ethnic background as themselves.

##### **Is this involvement with groups of people or with specific individuals?**

As noted above, contact with 'different' people was often made through employment and education or involvement with voluntary organisations. Contact often subsequently develop on an individual basis but the first point of contact was generally made through groups of people.

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## How important do you feel it is to have involvement with people who are different to you?

With few exceptions, focus group members felt it was important and beneficial to have contact with different people.

*“Definitely important. You’ve got to get a different look at life. You’ve got to see things from other people’s points of view.”*

*“It’s good to have a mix of people in your life, it makes people more balanced and more tolerant, therefore making society as a whole more tolerant.”*

A small minority of group members had experienced contact with different people through meeting asylum seekers and had not enjoyed the experience.

*“In fifth and sixth year, school was bombarded with refugees and all you did was fight with them. At the end of the day, if there was a fight, they’d get let away with it and us locals would get the blame and we get called racist... it was too easy to just put it down to racism.”*

The two individuals retained a strong sense of injustice on this issue.

Two other contributors expressed hostility towards asylum seekers on the alleged grounds that they received preferential treatment over other Glaswegian residents.

*“They got money for an internet suite, and the local people had to give up money for an aerobics club and keep fit.”*

One mid-affluent female expressed strong hostility towards the LGBT community and this view was echoed by other group members.

*“Not the gays. I’m against that totally. It’s Adam and Eve, not Adam and Steve. I don’t agree with all this walking down the street holding hands carry on when you are walking down your street with your weans – Queen’s Park is really bad for it.”*

### 4.1.7 Bonding and bridging

#### How good do you think people living in Glasgow are at creating bonds with people similar to them?

Bonding social capital refers to the ability to form bonds and create relationships with groups and individuals whom one regards as ‘similar’. Bridging social capital refers to the ability to create bridges with groups and individuals whom one regards as ‘different’.

The secondary data suggested that Glaswegians possessed strong competence in forming bonds with similar individuals and this evidence was reinforced by the primary data. LGBT group members awarded the city 8 out of 10 on this issue while young males offered the city 8.5 out of 10. Some views which illustrate this feeling include:

*“I think it’s the warmest city in the world.”*

*“You can stand at a bus stop and get somebody’s whole life story... you get a whole story for nothing.”*

*“I always get people asking if I need help, or at least being approached, that is more likely to happen in Glasgow. I’ve had help by 10 strangers when falling down in Glasgow, but in Edinburgh I’ve had 10 walk by me.”*

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However, some focus group members suggested that the ability to form bonds with similar people might impede the ability of Glaswegians to build bridges with different people.

*"It's all kind of wee communities in Glasgow. They like to stick with who they know but they don't like to branch out and meet other people because they don't know what they're going to find."*

*"Trad weegies [i.e. Glaswegians] are often really bad at moving outside their own group."*

### **How good do you think people living in Glasgow are at building bridges with different people?**

Group members were less confident about the ability of Glaswegians to build bridges with people perceived to be different from them. When asked to suggest a numeric score on this issue, the young male group awarded the city 3.5 out of 10. Subjective comments which illustrate this evaluation include the following.

*"When something new comes in they just don't like it, like the whole asylum seeker thing. It's as though some communities are scared of new things, and to move on."*

*[Bridge-building skills] might need some attention. We like to think we are good Glaswegians, but there are people who come into Glasgow and sometimes they make a genuine effort to build bridges and they are not reciprocated. Glaswegians are very loyal to Glasgow, but there's more to it than the West of Scotland."*

Several reasons were advanced to explain this poor score. Glasgow's long history of sectarian division was identified as a potential inhibitor of bridge-building skills.

*"I made a friend at university, and afterwards he said to me, 'I've never had a wee black pal before'. To him that was acceptable."*

*"Someone at university said to me, 'Do you people in Singapore stay in trees?' Some are very ignorant of other cultures."*

The role of alcohol in facilitating social interaction created a barrier for some BME males.

*"I have made lots of good Scottish friends, when it comes to going to the pub for a wee drink I find it hard to say no... I have lost good friends through not being able to mix - on top of it there's this underlying attitude that you're not one of them if you don't drink. A lot of Scottish people hold the attitude that if you want to be like them you have to take a drink."*

*"A couple of people I know ask me to go in to the pub, they say you don't need to drink, and you find it really hard to explain why you can't... they interpret it as an affront, as a barrier, as saying you just don't want to be with us. It is a barrier to getting involved in the community."*

Other individuals pointed to the way in which newcomers often band together to provide mutual support and encouragement.

*"The refugees and asylum seekers at Kingsway are very cliquey. They do look out for their own."*

Language was identified as a potential barrier to building bridges.

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*"I think it's easier for the children [of asylum seekers and refugees] to mix with other people as they go to school, but I think with the adults, a lot of them don't speak English. I can see how it's hard for the mums if they aren't working, they're not getting out very much to mix with people."*

Some focus group members identified current world tensions and irresponsible media coverage of these issues as further barriers to bridge building.

*"After what happened with the London bombing, I think a lot of people are more wary of them [asylum seekers]."*

Young female focus group members felt that the bad publicity which had surrounded the refugees and asylum seekers housed at Kingsway high-rise flats resulted in local residents making less of an effort to get to know them.

Despite these problems, several group members believed that Glaswegians were becoming better at building bridges and that only a small unrepresentative sample of Glaswegians were guilty of outright bigotry.

#### **4.1.8 Future priorities**

Focus group members identified several means of improving social capital in the city.

##### ***Increased recreational and sporting facilities for younger people***

Many group members (especially older women, young people and less affluent males) felt that increased provision of recreational facilities for young people (especially 14-18 year olds) would boost social capital, involvement and integration within the city. Sample comments on this issue included the following.

*"More social and recreational activities should be created for 14-18 year olds because they're at a difficult age and there's nothing much for them. There's lots for younger kids and over-18s can go to pubs but teenagers are stuck in the middle and often end up feeling bored. They should be provided with sports facilities and unlicensed cafes."*

*"Football and other sport camps would be a good way for people of different backgrounds to mix."*

Older female participants also wanted more adults to become involved in running football teams, Boys Brigade companies, scout troops, karate clubs etc to provide recreational opportunities for young people.

One contributor felt that the city should provide more free to use football pitches which did not require booking. Another contributor (young male) felt that Glasgow City Council should give teachers extra payments to lead extra-curricular activities (sports and otherwise) as they had done in the past, and that these activities should be organised across (rather than within) schools.

##### ***Increased community facilities***

In conjunction with the above, some young male group members recommended increased provision of community facilities as a means of boosting social capital. Two contributors expressed strong support for community radio as a mechanism for creating feelings of belonging and disseminating information.

Several young females felt that the Council should be more proactive in publicising the existence of community amenities which they do provide.

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*“There’s been a youth group in Partick for about 4 years and I’ve only found out about it. The problem is no-one knows about it and other groups that are out there. The Partick Annex is shoved away up a wee street and people don’t know where it is or what services are offered.”*

*“A lot of these things that are going on, like groups and community centres, they don’t have money to advertise what’s going on, maybe they should have central information services.”*

Disability group members recommended increased provision of accessible facilities as a means of improving social capital. They spoke of improving transport in order for people in wheelchairs to access the city, improving toilets so that people with disabilities could access them, and to concentrate efforts on reducing exclusion and marginalisation. One participant summarised the views of the group - *“think of the future now”*.

### **Education and prejudice**

Many focus group members identified education as a key means of promoting social capital and combating unhelpful stereotypes which hinder the development of social capital.

*“The young ones need to be educated. A mother was with her son, and her son said to the black boy, ‘you \*\*\*\*\*’... the young ones need to be educated to understand that we’re all one.”*

Education was particularly identified as a key means of combating prejudice that has been directed towards asylum seekers. Some focus group members felt that they had been inadequately prepared for the arrival of asylum seekers into the city, and that this lack of preparation had been exacerbated by the media’s unhelpful and occasionally sensationalist handling of the issue.

*“I’ve seen asylum seekers but I don’t really know that much about them. We just know they’re living here in the country because of war... but we don’t know anything about them, or how long they’re going to be here for. There’s nothing really positive, all the stories you read in the newspaper are always negative.”*

One affluent female contributor felt that asylum seekers should learn English to assist their integration, but another contributor felt that Glaswegians should do more to familiarise themselves with a range of languages and cultures - the onus was not just on asylum seekers to adapt to local customs.

*“Bring adults into a learning environment across the board to learn more about the cultural diversity of the city.”*

With regard to asylum seekers, one young male group member felt that asylum seekers should be dispersed more evenly throughout the city’s residential districts to combat the development of ill-informed stereotypes.

*“If Glasgow is going to take in more refugees and asylum seekers, don’t stick them all in the one area, disperse them around the city more evenly. If they’re concentrated in one place, this is how an ‘us against them’ mentality can develop.”*

### **Increased policing and surveillance**

Several contributors felt that increased policing and surveillance (through CCTV cameras) would assist the formation of social capital by making people feel safer and more likely to leave their homes.

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*“More police and law and order keeping kids in order. People who take drugs should be imprisoned rather than getting the soft touch.”*

Interestingly, two young males spoke out in favour of increased community policing as a less punitive means of promoting social capital.

*“There should be a larger number of small local police stations instead of police services being concentrated in one big office. The smaller stations would be more accessible and community-oriented. The community aspect of policing should be enhanced. People are scared of the police and they’re faceless.”*

Another young male questioned the deterrent value of CCTV.

*“CCTV only tracks offenders once they’ve committed a crime. You can always just shove your hood up and you’re disguised, so CCTV isn’t all that good.”*

Older females also wanted increased community policing and more female police officers.

*“They can build up a good relationship with local people and this is likely to nip trouble in the bud. These community police should visit schools and tell pupils what’s right and what’s wrong. We want police out of their cars and onto the streets.”*

### **Miscellaneous**

Some focus group members identified additional means of improving social capital which are worthy of some consideration.

Some felt that social capital could be increased by holding more festivals and events where people from different communities could interact in an enjoyable manner.

*“I live in the north end of Glasgow and it is multicultural with people from all walks of life, which is handled really positively through festivals with the local people, they are for educating the community and it has really improved and integrate communities.”*

Members of the disability focus group also wanted to become involved in planning public walkways, buildings and transport facilities to ensure that they were fully accessible to all the city’s citizens.

Other group members believed that Glaswegians had to accept their individual responsibility to improve social capital in the city.

*“People should try a lot harder to make an effort and to interact with each other. We’ve tried so hard for so long and we’re still being told that we have to integrate into the community. There’s got to be trying on both sides.”*

Other contributors placed Glasgow’s problems in a bigger historical and economic context.

*“It’s too late, you have a whole generation who have been totally disenfranchised, and their children. We need massive investment in the social infrastructure – housing, education, police, health, roads, drains, electricity, water, transport – massive, massive investment in the physical and social infrastructure. We’ve had massive cuts in taxes over the past 20-30 years and were paying a price as a society.”*

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Finally, one young male contributor suggested a complete change in social recreational patterns to boost social capital throughout the city.

*“People need to get out more. They shouldn’t just stay at home. Too many people stay in and watch TV and play playstation, there should be more human interaction.”*

## **4.2 Organisational stakeholders**

### **4.2.1 Perspectives on social capital**

#### ***Hard to define***

Several stakeholder did not fully understand the term ‘social capital’ prior to explanation. Some viewed it as a very broad term to apply to a city, others saw it as a trendy jargonistic buzz word.

*“There’s a lot of it [social capital] in Glasgow, it comes in different forms and is very diverse. We have worked in Social Capital for years and not been calling it that. It was about funding and community work through housing - we used to call it community work.”*

#### ***Dependent upon networks available***

It was perceived that social networks in Glasgow differed across areas and that access to social capital depended on individual circumstance. Poverty, territoriality and sexuality were identified as factors that could influence and affect people’s access to networks.

*“Territoriality is a major issue. It can inhibit the development of social capital and discourage people from using services which they consider outside of their ‘territory’.”*

*“You can’t separate social capital from the question of geography... look at places like Easterhouse where there are ‘islands’ of streets separated by seas of wasteland. How can social capital thrive in such a context?”*

*“Organisations are historically heterosexual, therefore hold values and beliefs which can exclude people.”*

It was felt that that the concept of social capital did not fully recognise the importance of inequality and that it lacked tangible properties which could be applied across a city.

*“Social Capital does not have the political analysis of community work though, it does not help identify inequalities.”*

*“It’s highly invisible, not something that Glasgow rates. It doesn’t register on its radar, as it’s a concept of ideas that are too touchy-feely.”*

#### ***People’s involvement***

Some stakeholders believed that Glasgow possessed a number of tight-knit neighbourhoods in which a strong sense of involvement flourished. Indeed, some believed that this phenomenon was stronger than in other areas in the UK. Community representation was considered to be high in Glasgow across a range of issues.

*“There is community representation on a range of things – Glasgow has quite a lot of history on this in terms of things like tenant associations, housing associations, credit unions: social capital is wide and deep.”*



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One stakeholder explained that Glasgow City Council (GCC) has supported Community Councils since their inception 35 years ago. The Community Councils' Resource Centre in Glasgow is the only one of its kind in Scotland. There are currently 80 Community Councils in Glasgow, with 10-15 members in each. It was felt that Glasgow City Council attempted to consult people on service delivery through the Community Councils.

*"There has been a long established network of engagement with the communities of Glasgow."*

However, while attempts were made to consult communities and involve them in service delivery, stakeholders discussed the amount of 'impact' different communities can have within a network, and the motivations of individuals for getting involved.

*"Many people are in networks but not all networks have equal power and influence."*

*"It's incredibly complex... people have a great will to progress the agenda but have huge problems with different motivations when coming together."*

### **Role of organisations**

Several stakeholders believed that agencies and organisations working within an area required strong levels of connectedness in order for social capital to succeed. Some stakeholders believed that Glasgow's organisations co-operated fairly well in comparison to other Scottish cities due to a greater sense of understanding and better sharing of information, while other stakeholders were more sceptical of this.

*"The Police and the Council are a good example of this happening. Government policy on community safety and statutory planning meant we had to get round the table to discuss things, and in the end that was a benefit to both organisations."*

*"At a personal/individual level, there is no evidence that Glasgow's social capital is any different to other British cities."*

### **4.2.2 Bonding**

**How do you think Glasgow is currently placed in relation to this dimension – please use a scale of 1 to 5, where 1 is no bonding and 5 is very strong bonding.**

Stakeholders awarded an average rating of 3 for bonding.

#### ***Bonding within organisations***

Stakeholders felt that Glasgow was slightly above average in relation to bonding. There was felt to be a traditional sense of support among organisations within the city, with organisations having similar remits coming together. One stakeholder described Glasgow as being *"a more insular city than some"*. This was felt to generate both positives and negatives.

*"Normally when people are in this situation they pull together. Also, however, competing for resources undermines that solidarity."*

It was felt that some organisations which have traditionally needed to pull together, such as voluntary and community organisations, were more expert in bonding activities.

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*“Organisations I’m familiar with are very strong on bonding. Bonding is strong with some public agencies, with others, there is absolutely no bonding. Voluntary organisations and community organisations naturally bond together. Very difficult for them to do so though as often they’re not encouraged... the concept of bonding is not actively encouraged.”*

*“Within the public sector, bonding is not the norm. There’s a degree of competitiveness and a lack of confidence.”*

However, one stakeholder cited Scottish Enterprise Glasgow’s example in mapping all of the organisations in the city that provide business services and support. Following this mapping, the main players came together and agreed to work under one access point/phone number and this resulted in a 100% rise in the number of new businesses established in the city. One stakeholder highlighted this as a strong example of constructive bonding in Glasgow.

Glasgow is also currently mapping all the organisations with an interest in incapacity benefit and mapping the organisations with an interest in this. The city had noticed a lack of connectedness between these organisations, and is endeavouring to create a ‘conveyor belt’ to assist people out of disability into employment.

*“Social Work have an £8m budget to get people off drugs/alcohol/benefits into employment but they do it like that [blinkers].”*

One stakeholder alluded to the financial assistance some groups received which help community groups get together, particularly minority groups such as the LGBT and BME groups. At the voluntary/community level, the stakeholder believed there had been some success, but also saw developments with partnership working between health and social work, the police, and drug addiction teams. Key to bonding within organisations was thought to be partnership working and ‘buy in’ from senior management throughout the organisation.

### **Community representation**

The development of bonding social capital in the city had been assisted by opportunities created for community representation and involvement. Contributors noted, however, that the same people are often active across different organisations, e.g. Community Councils, Housing Associations, Tenants Associations, School Boards, etc.

*“Social capital is dependent on a minority of people.”*

Those stakeholders who work directly with communities felt that there are many well-bonded communities within Glasgow with evidence of strong networks. The concern was raised, however, that there is considerable disparity between different areas.

*“In communities there is less social capital than there used to be. People used to have a ‘we look after our own people’ attitude, but now they don’t know who their neighbours are.”*

One stakeholder spoke of bonding, at an individual level, being under pressure as a result of the nature of contemporary society. In his opinion, there is a negative trend in terms of bonding social capital.

*“Things these days are transitory, fragmented, people work in different ways. There’s a modest trend towards home working, which research has shown isn’t conducive to developing social capital.”*

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## **Do you think strengthening social capital through bonding has been a priority for Glasgow in the past?**

Many stakeholders who commented on this believed that strengthening social capital through bonding has been a priority for Glasgow in the past. This resulted from:

- Governmental requirements to form partnerships;
- adversity;
- shared objectives;
- dedicated people to deal with Community Councils; and
- SIPs.

One stakeholder stated that although there has been support for developing social capital in recent history, the recognition of its importance has been higher, with a shortcoming being the failure to engage with the end users of policies. It was felt that more needed to be done to develop social capital, particularly with regard to the empowerment of individuals.

*“In the last 10-15 years, progress has been huge, overcoming many challenges. Progress includes formulating relationships with groups, supporting people and helping them rather than facilitating, giving ownership to the community.”*

The responsibility for promoting bonding amongst organisations was perceived to be blurred and so the actual promotion of community cohesion sometimes created difficulties.

*“This is a key challenge - there has become a blur of what people are responsible for, staff work across borders to different protocols i.e. housing, education, health - there are many difficulties there.”*

Stakeholders identified the traditional networks which exist within Glasgow as something which had helped to prioritise bonding in the past. However, these networks often excluded certain groups of people.

*“Glasgow has had too much bonding social capital among too few groups in the past and this has been a bad thing. It has sometimes made people very ‘inward-looking’ and there has been a lack of class mobility across generations - people tend to stay in the class they were born into and this is a destructive example of bonding social capital.”*

*“There’s a myth about Glasgow being very sociable and approachable but this isn’t always true. Today, it’s still a matter of ‘who you know’ rather than ‘what you know’. There has a long history of word of mouth recruiting and internal recruiting and this has discriminated against BME groups and other ‘outsiders’.”*

Stakeholders also felt that public agencies had to be seen to be actively promoting bonding activities across communities, and working in partnership to do so.

*“It’s not been a priority. I’ve been astonished that there’s such a lack of trying to identify a common identity. We may all be in the same partnership, but there’s a lack of effort to introduce social cohesion.”*

## **Do you think that strengthening social capital through increased bonding should be more of a priority for the City in the future?**

Stakeholders all agreed that Glasgow should try to strengthen social capital through increased bonding in the future. Stakeholders perceived the need for more co-operation and more joint working.

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It was also felt that there is currently something of a 'closed circle' amongst organisations who work well together, with organisations on the periphery being taken less seriously. Stakeholders felt that organisations should play a greater role in actively strengthening bonding.

*"Not sure how we're going to get through the next ten years if we don't start creating that sense of cohesion, mutuality, trust, and sense of each bringing something to the table."*

Engaging with communities was said to produce benefits in terms of community regeneration, and was therefore felt to be a priority area for bonding.

*"There is evidence to show that when people have the status, value and recognition i.e. family, peer group, networking in community etc, then there are benefits to people's health. They feel better about themselves."*

One stakeholder felt that although bonding should be a priority, it should not be the top priority, as there are costs involved and it doesn't improve social capital in itself. Increased bonding was felt to be good, as long as it was complemented by bridging among different communities.

*"There are costs involved, there's an opportunity cost. It shouldn't be the be-all and end-all. It's not a means in itself."*

Several stakeholders made the point that some groupings can have both positive and negative connotations. For example, football teams can be extremely positive if you feel part of them, but if not, people can be excluded and can become the 'other' or 'the enemy'. Bonding can therefore go along with inward-thinking mindsets and corruption, with the Mafia being given as an example of a highly bonded network.

Another stakeholder cited the example of BME communities, referring to them as 'ghettoised outsiders', meaning they suffered discrimination as a result of not being viewed as 'part of the team'. This stakeholder also argued that you can't build bonding social capital without also building bridging social capital, so the two concepts are heavily interlinked.

*"We meet most people through work and you need more of the BME community getting into jobs and then people will start bonding."*

### **4.2.3 Bridging**

**How do you think Glasgow is currently placed in relation to this dimension – please use a scale of 1 to 5, where 1 is no bridging and 5 is very strong bridging.**

Stakeholders awarded Glasgow an average mark of 2 with regard to bridging social capital. Overall, stakeholders felt that Glasgow performed less well with regard to bridging, and this was thought to be the result of people and organisations being more likely to bond with people and organisations who are similar to them. One stakeholder identified some prevalent trends in contemporary society.

*"There are recent trends in society – increased specialisation and fragmentation as consumers, e.g. fashion groups among young people such as Goths, Moshers, Neds, etc. They are very well defined and segregated."*

#### ***Bridging across cultures***

Some stakeholders drew attention to the different cultures in different areas of the city, e.g. south versus north, and the lack of interaction, particularly in areas of poverty.

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Gang violence in certain areas was felt to be an indicator of poor bridging.

*“There are geographical areas where people would not interact, particularly in rough areas or areas of poverty where people are scared to walk down the street.”*

*“Bridging is more limited than bonding. Look at the territorialism in Castlemilk, it’s so bad that if people move into their area it causes a knifing. This kind of attitude is more prevalent in lower income areas, where people have not had the opportunities to move out of an area. Their horizons are seriously limited.”*

Some stakeholders felt that high levels of racism and homophobia in Glasgow reduced opportunities for bridging.

*“There is a lot of racism in Glasgow, for example, house prices are cheaper on the south side because people do not want to integrate with their Asian neighbours.”*

*“Racism, homophobia and a fear of different backgrounds all have negative bonding problems. People stay in their groups because they are scared of their identity getting damaged.”*

In terms of bridging with BME communities, one stakeholder felt that black and ethnic minority groups were isolated and tended to be inward-looking because the majority population did not fully appreciate the considerable diversity within BME communities.

*“It is difficult, because the authorities should not see the BME as homogenous, they have differences but they are shared differences.”*

With regards to organisational bridging, it was felt that Glasgow’s ‘inner circle’ of organisations was not doing enough to reach out to organisations on the periphery, who are perceived to be different.

*“There’s lots of bridging taking place, certainly between voluntary and public sector organisations. Generally though, we’re not great at it, there’s no real effort made, no imperative to do so.”*

On the positive side, there were said to be various agencies that promote voluntary activity and partnership working, e.g. SCVO, GCVS. It was felt that these agencies make huge efforts to create bridges between people and agencies, and the internet was helping to create new forms of networking.

*“They provide networks that did not previously exist.”*

### **Do you think strengthening social capital through bridging has been a priority for Glasgow in the past?**

This question produced mixed reactions. Some stakeholders felt that they were not able to answer the question, others felt that bridging had been a priority, and others believed that it had been a low priority.

One stakeholder believed that GCC’s support for Community Councils over the last 35 years demonstrated strong support for bridging. Another pointed to the role of GCC in assisting the integration of asylum seekers and refugees.

Others felt that bridging had been given lower priority than bonding. Although the Government had tried to encourage partnerships between different types of organisations, e.g. private and voluntary sectors, it was felt that this was quite difficult to achieve.

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*“These organisations are not as comfortable working together, they don’t understand each other. The backgrounds of the individuals are different, they have different skill sets, so interaction is difficult.”*

*“No effort has been made to encourage bridging in the past. There are no real relationships, or building of long-term relationships. No investment in processes.”*

Some stakeholders felt that Government offices and religious groups had done little to actively encourage bridging.

*“Religious groups and churches haven’t done enough to create bridging social capital in the past and, in some cases, they’ve actively fought against it. For example, some churches bonded together over Section 28 in order to try and destroy bridging social capital.”*

*“Power-brokers have only paid lip service to the ideal of bridging social capital in the past - they’re only interested in photo opportunities, the illusion of bridging social capital, not the reality.”*

Some stakeholders also claimed that many community groups did not truly represent the communities they were meant to speak for. With reference to BME communities, one stakeholder noted:

*“The power-brokers only want to hear from middle class, middle aged, BME community members, not real BME people. These middle aged, middle class BME people are not representative of the whole community. Too many BME representatives have been bought off with project funding, they’re afraid to be too critical in case their grant gets cut off.”*

Others were unaware of any political agenda to promote around bridging, and felt that bridging occurs when people within the city come together fortuitously.

*“[It’s] never been a part of policy in the public sector. On a community level it was probably a priority, but not with a name - it’s done to get through daily life i.e. friend of a friend who knew a mechanic. When we had local businesses, that was how it was done.”*

### **Do you think that strengthening social capital through increased bridging should be more of a priority for the City in the future?**

Stakeholders generally agreed that Glasgow should prioritise the strengthening of bridging social capital in the future. Stakeholders believed that organisations should spend more time talking to and trying to understand each other.

*“Yes, for similar reasons to networking - it improves business, community engagement and improved communities.”*

One stakeholder spoke of the misunderstandings that currently exist within organisations. Two stakeholders indicated that Glasgow City Council could be involved in promoting bridging more widely across organisations.

*“There are misunderstandings, e.g. the voluntary sector mistrusting the private sector, etc. In a lot of cases this mistrust is wrong. More bridging can help to break down these barriers between organisations.”*

One contributor suggested that Community Planning will have a positive effect on bridging because of its wider and more inclusive approach, but it was recognised that this would not happen immediately.

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*"We must realise that social capital can't be engineered overnight, it can take decades and generations to create."*

However, another stakeholder pointed out that there are substantial costs involved in increasing bridging, and these could not be ignored.

Finally it was believed that there is sometimes too much bridging and bonding with the professional networkers, which happens within community groups, rather than within the communities themselves.

*"Race and culture groups are plagued by minimal short term funding and there's an excess of small-scale pilot projects. We need long term projects if the big players such as Glasgow City Council are going to take these groups seriously."*

#### **4.2.4 Personal responsibility**

**There is a view that the development of Glasgow's social capital should expect individuals to take more responsibility and be more personally active in the development of networks. What are your comments on this view?**

Stakeholders generally agreed, in principle, that individuals should assume greater responsibility for developing networks but felt that such a goal would be quite difficult to achieve in practice.

*"People should take responsibility, yes, but how? People participate through necessity and desire – groups move on and interests change."*

One stakeholder explained that many individuals work in structured contexts within their organisations, and that organisations needed to send out signals to encourage employees to become more involved in their community.

The importance of organisations being involved in the process of linking individuals to the community was thought to be key to the development of social capital.

*"Organisations will need to encourage employees to become more involved. It won't happen quickly. It's difficult to change culture and behaviour."*

The idea of individuals assuming greater responsibility for the development of networks was said to be inherent in the GHA's Glasgow Gold project (launched April 2005). Although this strategy adopted a punitive approach which was not universally admired, the project was thought to be working relatively well.

*"People sign up to a residents' charter, accept certain standards and have to meet these standards in order to win incentives, e.g. no anti-social behaviour, properties in good order, etc. They get discount cards, competitions, garden makeovers, etc."*

Another stakeholder highlighted the importance of rewarding individuals and creating meaningful relationships between service providers and the communities they serve.

*"It's the quality of engagement that is important, and the measure of success it engenders. People have greater bonds with Tesco and Asda because the staff are friendly and responsive - we want public services to be as responsive."*

Another stakeholder felt that organisations which represent the views of marginalised groups require better and more secure funding.

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*“We can’t speak on people’s behalf without security of funding. Resources must be invested in supporting participation and articulation.”*

Individual motivations for becoming involved in community activity also needed to be better understood.

*“In order for a view to be fulfilled we must have an understanding of the motivations which stir people to get involved. This doesn’t happen by its own volition. Why do people get involved? Most groups evolve out of anger over injustices such as the Poll Tax, the 3 meals a day campaign and so on. We need a basic understanding of why people are motivated.”*

Other stakeholders felt that individuals should not be compelled to become personally active as they have the right to make their own decisions.

*“What right is there to take this view? Execution of policy is often by relatively affluent middle class people, who are well educated. If the disadvantaged choose to stay home and watch television, what right have policy makers to comment on this?”*

*“It’s not the function of the individual to have to battle individually for their health, well-being etc... Quite insulting to say to people they have to get off their backsides and do something. It undermines the role of public and voluntary sector organisations.”*

#### **4.2.5 Barriers to developing Glasgow’s social capital**

##### **What do you see as the main barriers to Glasgow being able to further develop its social capital?**

Stakeholders identified a range of barriers which inhibited the development of social capital in Glasgow.

##### ***Apathy/ lack of time/ motivation***

Some stakeholders identified apathy as a major barrier. There was felt to be a need to educate people to believe their opinions count and to engage more with young people, though this was recognised to be a tremendously challenging task.

*“We’re going to have a demographic deficit. You just don’t have the same type of person coming through.”*

*“How to engage young people? How to make it interesting? These are important questions.”*

Lack of time was identified as a further barrier. Individuals often have extremely heavy workloads in their employment and this discouraged them from getting involved in wider community activities in their free time.

##### ***Investment/funding***

Insufficient investment was identified as another barrier. One stakeholder felt that community councils were not well supported, and it was also suggested that the organisational funding regime created competition.

*“Funding... inevitably puts one organisation against the next.”*

Investment in Glasgow’s infrastructure was highlighted by one stakeholder as a key challenge for the City when developing social capital.



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### **Changes happening in Glasgow**

Changes occurring within the city (e.g. uncertainty regarding employment) were identified as further barriers to developing social capital.

It was noted that changes in policy could result in resources being diverted away from developing the city's social capital.

*"If a parent organisation, e.g. Scottish Executive, SEN, or COSLA, instructed a change in policy, it would divert resources away... bring a bias into policy."*

The focus of the work was also discussed under the theme of change taking place within Glasgow. One stakeholder asked how the move towards concepts of social capital had been tailored towards certain groups.

*"What about those seeking asylum or those who are marginalised, is Social Capital a way to improve their community cohesion? And if it is thought to be, why is it? Barriers that cause inequalities such as disabilities need to be considered - how can people from these groups get involved in a meaningful way?"*

### **Lack of knowledge/ignorance**

There was felt to be a lack of knowledge about different organisations, what they do and what their objectives are. One stakeholder felt that many people in the city lacked empathy towards individuals and organisations whom they perceive as 'different'.

*"Ignorance moves across religious divides, social class divides, age divides, etc. People have little sympathy for other groups within the city."*

Another opined that there was a lack of understanding about the concept of social capital which required further exploration and communication.

*"How do they analyse what they see as social capital? What is it? Social engineering? Social justice? Does it give added value? Does it assist in the cohesion of the city?"*

### **Geography of Glasgow**

Glasgow's geography was identified as a key barrier to developing the city's social capital. This was as a result of poor areas that are spread across the city, suburbs on the edge of the city (often outside the city boundaries) and strong territorial feelings in some parts of the city.

*"These people [living in peripheral suburbs] probably feel less attached to the city as they don't pay their taxes to the city."*

*"Communities are more disparate than ever and more multi-ethnic, and lifestyles mean travelling miles to work and then they just go home to sleep. Also, the level of fear now in communities makes people reluctant to speak to neighbours or acknowledge people in the street."*

The break-up of Strathclyde Region was also believed to have retarded the development of social capital. One stakeholder believed that Strathclyde Region had placed greater emphasis on social capital than Glasgow City Council currently does.

*"GCC wants to differentiate itself from its predecessor, so they've dropped many of its policies, including some of the good ones. Because GCC is smaller than Strathclyde Region, it's less able to get involved in*

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*strategic planning than the regional body. Strathclyde Region was much stronger on community development than GCC.”*

### **History of negativity**

One stakeholder also drew attention to a history of negativity in the city, claiming that many people were inherently suspicious of token gestures and good intentions.

*“Glasgow has an aggressive political history... there is a fury in Glasgow. Look at the morning after pill - it was made available in Forth Valley NHS and Tayside with no problems, but when it was made available throughout NHS Greater Glasgow we were inundated with complaints - it was like WWII with marches and people going crazy-mad!”*

### **Community development working**

In order to overcome this negativity, stakeholders felt that social capital should be introduced on a democratic basis, allowing communities to participate in the debate. Stakeholders also felt that central government needed to invest more time, money, and resources in improving community development activities.

*“There’s a need for real community development work and not just ‘partnerships’ because these partnership often tend to be partnerships among paid staff and this is not real social capital.”*

## **4.3 Summary of primary research**

Analysing the testimony presented by citizens and stakeholders through primary research reveals eight major themes. These are outlined below.

### **Bonding social capital**

Glasgow has high levels of bonding social capital and considers itself good at generating bonds. When asked to offer numeric scores on this issue, citizens awarded 8.25 out of 10 while stakeholders offered 3 out of 5. The testimony presented by Glasgow’s citizens in favour of Glasgow’s warmth and willingness to create bonds was also evident. The evidence presented in the secondary data also revealed high overall scores for Dimension 2 (social networks and social support).

### **Bridging social capital**

Glasgow is less good at bridging social capital. The numeric scores awarded in this area varied from 3.5 out of 10 to 2 out of 10. This issue was not covered within the extant secondary data but the testimony offered by both citizens and stakeholders in the primary research clearly indicates that Glasgow has a long way to go in this area.

### **Prejudice**

Glasgow has had a long tradition of sectarian division and, based on the testimony provided by both citizens and stakeholders, homophobia and racial prejudice continue to blight the lives of many groups and individuals who are seen as ‘different’. This ongoing prejudice severely hampers Glasgow’s ability to generate higher levels of bridging social capital.

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## **Bonding vs. Bridging**

Some citizens and stakeholders expressed the view that Glasgow's excellence in generating bonding social capital actually inhibits its ability to generate higher levels of bridging social capital. There is a strong feeling of 'tribalism' within certain parts of Glasgow and many individuals are so keen to bond with other members of the tribe that they neglect to form bonds with 'outsiders' and/ or perceive them as threats. Instead of viewing the world as a 'them vs. us' dichotomy, Glaswegians need to develop a 'them and us' mentality.

## **Territoriality and urban demography**

Citizens and stakeholders both identified Glasgow's urban demography and unique social structure as further inhibitors of bridging social capital and this works in tandem with the point noted above. Glasgow consists of a number of small tightly-knit neighbourhoods which often manifest strong feelings of territoriality and while this may foster social capital within the enclave, it retards the development of social capital across neighbourhoods, with violence often taking the place of constructive cooperation. Furthermore, Glasgow possesses a number of affluent suburbs on the outskirts of the city who seem to feel little or no identification with the city or its poorer inhabitants.

## **Appetite for improvement**

Despite these problems, Glaswegians do have an appetite to improve bridging and bonding within the city. Stakeholders expressed enthusiasm for developing bridging within the city and, even though citizens awarded the city low scores for bridging social capital, they displayed a clear enthusiasm for improving matters in this regard and a clear appreciation of the benefits that may be derived from meeting and mingling with 'different' people. This provides hope for the future and indicates that Glasgow need not remain mired in prejudice, intolerance and gang violence indefinitely.

## **Public agencies**

Both citizens and stakeholders saw a clear role for public agencies to play in boosting social capital within the city. Neither group felt that the onus for improving social capital matters in the city should rest solely with the individual citizen. Citizens suggested four principal means of boosting social capital within the city and all were dependent on increased provision of public resources and public sector intervention. Several stakeholders also pointed to the valuable role played by agencies such as Glasgow City Council, Glasgow Housing Association and Scottish Enterprise Glasgow in fostering improved levels of social capital within the city.

## **The work-life balance**

Both citizens and stakeholders pointed to problems in the work-life balance as impediments to developing social capital within the city.

Unemployed citizens are often cash-poor and time-rich and the lack of resources (and connectedness one normally enjoys through work) impedes their ability to become socially involved.

Affluent citizens in well-paid jobs are often cash-rich and time-poor, and their lack of time (and energy) during their out of work hours often discourages them from becoming socially engaged.

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The work-life and cash-time balance needs to be improved for both sets of Glaswegians and, if it is, perhaps individual citizens can play a more active role in boosting social capital in the city. The lower levels of social capital enjoyed by residents of deocat 6/7 areas (where unemployment is often high and incomes low) was clearly picked up within the secondary data analysis.

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## 5 Next steps

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The primary and secondary evidence both indicate that Glaswegians possess significant levels of social capital. However, some qualifications are necessary. Glaswegians feel they possess significant levels of bonding social capital but are less optimistic about the city's reservoir of bridging social capital.

The primary and secondary data both confirm the city's high levels of bonding social capital. In the secondary data, Glaswegians awarded themselves high marks for Dimension 2.1 (frequency of seeing and speaking to relatives, friends and neighbours), Dimension 2.3 (proximity of close friends), Dimension 3.1 (trust in people who are like you) and various aspects of Dimension 5 (view of the local area). This quantitative evidence was reinforced by testimony from both citizens and stakeholders who felt that the city performed well with regard to bonding social capital.

However, the primary evidence also suggested that Glaswegians are less optimistic about the city's level of bridging social capital. Correlating this primary evidence with secondary data is difficult as the Social Capital Framework and Assessment facet most clearly addressing this area (3.2 - trust in other people who are not like you) is currently bereft of data.

Nonetheless, the secondary data clearly indicated that Glaswegians are performing poorly in two areas where willingness to bridge with others must be at least partially present – Dimension 1 (social participation) and Dimension 4 (civic participation). While engaging with civic and social organisations may promote contact between people with similar views and attitudes, it is also likely to increase exposure to others who may differ in terms of ethnicity, age, gender, socio-economic status, ability and, possibly, sexual orientation. An assumption is being made here but what is certain is that if Glaswegians do not engage with social and civic organisations, they will not embrace 'the other' and their bridging skills will remain low.

The primary and secondary evidence both clearly indicate that Glaswegians are in retreat from collective endeavour and, in this, they are similar to their United Kingdom peers who, it is alleged, have retreated from the public domain over the last two years and embraced the realm of the private. This is evident in declining trades union and political party membership and rising voter apathy though, on occasion, many citizens still demonstrate strong support for single issue events and charitable activities. This disengagement from civic and social activity is of concern to policy-makers and it may be necessary to stimulate these 'dormant' collective tendencies in order to boost bridging social capital within Glasgow and throughout the United Kingdom.

Despite this negative evidence diagnosis, Glasgow's citizens demonstrated strong appreciation of the benefits to be gained from embracing the dissimilar and were keen to do more in this regard. Focus group members suggested diverse means of boosting social capital and all reflected a strong emphasis on community and public – as opposed to private – endeavour. The embers of social engagement are still glowing in Glasgow and it may require the oxygen of public intervention to fan them into flame.

Primary and secondary data appeared to be in conflict in one or two areas.

The secondary data indicated that, to some extent, women possessed higher levels of social capital than men. This was reflected by certain aspects of the primary data (e.g. connections with neighbours and feelings of identification with the home neighbourhood) but was, to some extent, contradicted by the experiences of some affluent and mid-affluent females who articulated strong feelings of alienation from their home neighbourhood. This was attributed to problems in the 'work-life balance'

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which, in their view, created affluent neighbourhoods where people were too exhausted to engage in significant social activity.

The secondary data also indicated that residents of affluent areas contained higher levels of social capital than those in deprived areas but this was partially contradicted by the above and by the comments of some affluent males who felt very little sense of belonging to their community or neighbourhood.

The secondary data clearly indicated that social capital increases with age and this was reinforced by primary evidence which indicated that older females placed strong emphasis on family, friends and neighbours as sources of support and strongly identified with their home neighbourhood.

However, while the secondary data indicated that young people possess lower levels of social capital, this was partly refuted by aspects of the primary data where young males expressed strong attachment to their neighbourhoods (if not their neighbours) and also to their friends and family. Young females also demonstrated strong attachment to their family and strongly believed that existing community facilities merited greater promotion in order to boost usage.

### **Looking ahead**

This research has revealed valuable information about levels of social capital within Glasgow – its strengths, its weaknesses and opportunities for development. As part of Glasgow's quest to be a "really ambitious" city, it ought to invest resources in tracking change in the city's social capital over time. Only by gathering such information will policy-makers know if their regeneration and development strategies are producing the desired effect. This research has identified secondary data sources capable of offering feedback on social capital and has also developed a methodology for conducting primary research on the subject. As such, it offers an excellent starting point for the city.