“...individuals (and their ill-health) cannot be understood solely by looking inside their bodies and brains; one must also look inside their communities, their networks, their workplace, their families and even the trajectories of their life” (Lomas 1998: 1182)

Introduction
This paper arises from a research study that addresses the experiences of older people living in socially deprived neighbourhoods of three English cities. Supported by the Economic and Social Research Council (ESRC) under its Growing Older Programme, the research examines the impact upon older people’s everyday lives of the multiple risks associated with living in such environments.¹ Such risks potentially include susceptibility to intense poverty and deprivation, vulnerability to serious crime, and restricted social relationships (Scharf et al, 2002a). In this paper we explore ideas associated with the concept of social capital and its value in explaining some of the social changes and pressures affecting the lives of older people who may experience various forms of social exclusion (Scharf et al, 2001). Social capital, which refers to the benefits that are associated with participation in social relationships and social networks, emerged as an important theme in academic debates during the 1990s. As a concept, it is deeply rooted in political and social scientific beliefs regarding the benefits arising from attachment to, as opposed to alienation from, community life. Portes (1998: 2) summarises this point in the following way:

¹ The research is entitled ‘Older People in Socially Deprived Neighbourhoods: Social Exclusion and Quality of Life in Old Age’. We are grateful to the ESRC for supporting this study (Grant No. L4802554003)
That involvement and participation in groups can have positive consequences for the individual and community is a staple notion, dating back to Durkheim’s emphasis on group life as an antidote to anomie and self-destruction and to Marx’s distinction between an atomized class-in-itself and a mobilized an effective class-for-itself.

During the 1990s there was growing concern, expressed in a variety of ways, that individuals, and in some cases whole communities, were becoming detached from social and political engagement. Robert Putnam (2000) referred to the ‘civic malaise’ affecting American society, perceiving a ‘breakdown of community’ and the rise of ‘individualism’ and ‘selfishness’. Concerns at a macro-sociological level were matched by an awareness that particular communities – especially those characterised by severe economic deprivation – were becoming progressively cut off from the mainstream of society (Social Exclusion Unit, 1998). At the same time, sociologists, such as Ulrich Beck (1992; 2000), referred to the rise of the ‘risk society’, in which greater emphasis was placed upon individual behaviour and responsibility, and where traditional structures (for example, those associated with family and kinship ties) appeared to be in decline. On the one hand, therefore, the weight of social trends appeared to be shifting towards the dissolution of social ties – this illustrated most clearly by the crisis affecting many inner-city areas. On the other hand, governments and policy-makers have been increasingly attracted to the idea that social relations themselves hold the key to solving the problems of hard-pressed neighbourhoods. Having been marginalised in the rush to elevate global markets, local, face-to-face ties are being promoted as a policy prescription to run alongside economic and cultural relations. As Schuller et al. (2001: 13) express it:

On this reading, social capital is to be taken quite simply at face-value: an attempt – though not necessarily one consciously planned by any set of individuals – to reintroduce the social dimension into capitalism. Perceptions of a rapid erosion of trust in daily relationships in multiple spheres, but notably in employment and marriage, have generated a wish to refocus attention on the quality of those relationships, and social capital has proved an attractive vehicle for bringing this about.

Our task in this paper is threefold: first, we review some of the ideas associated with social capital, and in particular the different ways in which it has been approached in the scientific literature. Second, we present some of the main theorists of social
capital, focusing in particular on the work of James Coleman and Robert Putnam. Finally, we consider how social capital is being measured and review some of the initial empirical work that explores linkages between social capital, health and different types of community.

Definitions of social capital
The concept of social capital has a substantial pedigree within the social sciences. Francis Fukuyama (1999) suggests that the term was first used by the American political reformer Lyda Hanifan in a 1916 study that described rural community centres (see also Putnam, 2000:19). Tom Schuller (2001) refers to a monograph entitled *Housing and Social Capital*, published in 1957 by the Royal Commission on Canada’s Economic Prospects, which addresses the role played by social capital in promoting the physical infrastructure of a nation. Four years later, Jane Jacobs (1961) in her classic study *The Death and Life of Great American Cities* highlighted mixed-use urban neighbourhoods as representing a form of social capital which could promote public safety and trust within communities. Fukuyama (1999) also notes the work of the economist Glenn Loury, along with the sociologist Ivan Light, working in the 1970s, who applied the term social capital to analyse problems of inner-city development. Finally, in the 1980s and 1990s, Pierre Bourdieu (1984), James Coleman (1987) and Robert Putnam (1995) extended use of the concept within the social sciences. Bourdieu explored the way in which different forms of capital – economic, cultural as well as social –influenced patterns of power and social status. Coleman (1987) examined the way in which social capital could promote or retard social development amongst the young. And Putnam (1995) introduced the concept into the wider political arena with his claim that the decline of ‘civic engagement’ (through membership of voluntary associations and the like) was behind rising levels of crime and anti-social behaviour within urban areas.

The idea of social capital is complex, and escapes easy definition. There are nonetheless some relatively straightforward approaches that might be drawn upon to develop our discussion. Robert Putnam (2000: 19) sets his definition out as follows:

>`Whereas physical capital refers to physical objects and human capital refers to properties of individuals, social capital refers to connections among`
individuals – social networks and the norm of reciprocity and trustworthiness that arise from them. In that sense social capital is closely related to what some have called “civic virtue”. The difference is that “social capital” calls attention to the fact that civic virtue is most powerful when embedded in a dense network of reciprocal social relations. A society of many virtuous but isolated individuals is not necessarily rich in social capital.

Francis Fukuyama (1999) encapsulates the idea of trust within his approach to the concept:

*Social capital* can be defined simply as a set of informal values or norms shared among members of a group that permits co-operation among them. If members of the group come to expect that others will behave reliably and honestly, then they will come to *trust* one another. Trust is like a lubricant that makes the running of any group or organisation more efficient.

Another important dimension to social capital is its use in ‘claiming' or 'drawing upon' resources of different kinds. This idea is captured by Portes (1998: 7) who suggests that: ‘[a] consensus is growing in the literature that social capital stands for the ability of actors to secure benefits by virtue of membership in social networks or other social structures’. He goes on:

Both Bourdieu and Coleman emphasize the intangible character of social capital relative to other forms. Whereas economic capital is in people’s bank’s accounts and human capital is inside their heads, social capital inheres in the structure of their relationships. To possess social capital, a person must be related to others, and it is those others, not himself who are the actual source of his or her advantage (Portes, 1998: 7).

The Office of National Statistics (2001), in a review of current uses of the term social capital, note the way in which it has been used by international governmental organisations such as the World Bank and the OECD. The latter defines social capital as: ‘networks together with shared norms, values and understandings that facilitate co-operation within and among groups’ (cited in ONS, 2001: 8). The World Bank, however, takes a more expansive view, suggesting:

Social capital refers to the institutions, relationships, and norms that shape the quality and quantity of a society’s social interactions…social capital is not just
the sum of the institutions which underpin society-it is the glue that holds them together.

Ideas about social capital also draw upon Granovetter's (1973) distinction between ‘strong’ and ‘weak’ ties. While the former refer to the ‘dense’ ties to family and those similar to oneself, the latter apply to individuals dissimilar to oneself. A related distinction is between ‘bonding’ and ‘bridging’ forms of social capital. Putnam (2000, p.22) summarises this as follows:

Some forms of social capital are, by choice or necessity, inward looking and tend to reinforce exclusive identities and homogenous groups... Other networks are outward looking and encompass across diverse social cleavages... Bonding social capital is good for undergirding specific reciprocity and mobilising social solidarity. Dense networks in ethnic enclaves, for example, provide crucial social and psychological support for less fortunate members of the community... Bridging networks, in contrast, are better for linkage to external assets and for information diffusion... Bonding social capital is ... good for ‘getting by’, but bridging social capital is crucial for ‘getting ahead’. Moreover, bridging social capital can generate broader identities and reciprocities, whereas bonding social capital bolsters our narrower selves.

Within gerontology, research has tended to focus upon the value of ‘strong ties’ such as those linked with immediate family and long-lasting friends and neighbours. Strong ties have the virtue of social inclusion; equally, reliance on these alone may risk people being separated from other important groups. Just as people may need a spread of ties for accessing help in securing employment or promotion, scattered and episodic ties may also be helpful through periods such as retirement and old age. Pahl and Spencer (1997: 37) make the general point that: ‘Those who have emphasised old-style ties based on gender, race or ethnicity as a way of empowering disadvantaged categories may unwittingly have added to their troubles by making it more difficult for such closer-knit groups to develop ‘bridging’ ties’. Such ties may be especially significant to the widow seeking alternatives to kin; to men and women entering retirement seeking to engage with new lifestyles; or to those needing help from abusive or exploitative relationships.
Theoretical perspectives
This next section is concerned with examining some of the main theorists in social capital research. Here, we focus in particular upon the work of James Coleman and Robert Putnam.

Social capital and education
Coleman’s research on social capital was focused around exploring the relationship between educational attainment and social inequality (expressed in relation to levels of school funding), with his empirical work including a number of longitudinal studies designed to contrast outcomes in state schools with those in Catholic schools. In *Public and Private High Schools*, Coleman (1987) investigates the educational attainment of pupils as an outcome measure of economic and social resources. Economic resources were measured by annual per pupil expenditure. Social resources were defined as either encompassing a ‘functional community’ or ‘value community’. Coleman describes a functional community as ‘a community in which social norms and sanctions, including those that cross generations arise out of the social structure itself, and both reinforce and perpetuate that structure’ (p. 7). This structure creates what Coleman refers to as intergenerational closure, where the community members, in particular parents and pupils, are linked by values, norms, and beliefs that are reinforced through the generations. He suggests that this type of social resource creates an inherent mechanism by which pupils are expected to do well. Value communities differ from functional communities in that parents and pupils are not connected or linked to other parents and pupils. Coleman gives the example of a school that might have a particular educational ethos and because of this attract parents who might share an ideology but would otherwise be disconnected from each other. He described Catholic schools as having a functional community and many other private schools and public schools as having a value community.

Coleman found that economic resources appeared to have little significant effect on student achievement. Annual per pupil expenditure was lowest for Catholic schools whose students on average performed academically on a par with or better than higher income resourced private schools. He concluded that the ‘evidence is solidly in favour of the social resources. The Catholic sector schools, with least economic
resources, outdistance the other two sectors in overall achievement growth of their students relative to comparable students in the other two sectors’ (p. 93).

Schuller et al. (2001) suggest that Coleman’s work combines economic and sociological perspectives in analysis the impact of social capital. The former focusing upon rational choice theory, the latter on understanding ‘the way action is shaped, constrained and redirected by the social context” (p. S95). Coleman’s approach was to view social capital as a resource that could be of benefit to individuals and communities. Such resources he viewed as being constituted through processes such as establishing obligations, expectations and trustworthiness, creating channels for information, and setting norms backed by efficient sanctions. Obligations, expectations and trustworthiness are described in the following way: ‘If A does something for B and trusts B to reciprocate in the future, this establishes an expectation in A and an obligation on the part of B” (p. S102). Information channels are described as the sharing and exchange of information between members that facilitate action. Finally, norms and effective sanctions can be established that facilitate or constrain certain actions. For example, norms that inhibit crime make it safe for residents to walk the streets at night.

The varied take-up and utilisation of social capital as a resource within social structure and social organisation may help in the understanding of different micro-, meso- and macro- level outcomes (as later investigated by Woolcock, 1998). Specifically, ‘the concept of social capital constitutes both an aid in accounting for different outcomes at the level of individual actors and an aid toward making the micro-to-macro transitions without elaborating the social structural details through which this occurs’ (p. S101).

‘Bowling Alone’: Social capital in decline

While the theoretical conceptualisation and construction of social capital within a sociological framework can be credited to Coleman (1988, 1990), its transfer to a macro-level has been strongly influenced by the work of Robert Putnam (1993, 1995, 1996). In his analysis of regional government in Italy, Putnam found that:
The quality of governance was determined by longstanding traditions of civic engagement (or its absence). Voter turnout, newspaper readership, membership in choral societies and football clubs – these were the hallmarks of a successful region. In fact, historical analysis suggested that these networks of organized reciprocity and civic solidarity, far from being an epiphenomenon of socioeconomic modernization, were a precondition for it (p. 66).

In a widely discussed paper *Bowling Alone: America’s declining social capital*, Putnam (1995) examined what he called the decline of a once vibrant American civil society. Since the 1960s, so the argument goes, national data sets have shown there to be a steady decrease in different forms of civic engagement. Putnam refers in this context to declining voter turnout and attendance at political rallies, a decrease in public meetings on town and school affairs, reductions in people’s willingness to serve on committees of local organisations or to work for a political party, and declining membership of civic organisations. Taking the example of bowling, Putnam argues that this activity has now moved from being conducted within a group or association, to a largely individual pursuit. Post-war generations, reared on a diet of television, appeared to be withdrawing from the group-orientated activities around which their parents and grandparents had based their lives. Putnam (1995) concluded that involvement in a range of associations from Rotary clubs to Bowling leagues had fallen over the past 25 years, as had the general willingness of Americans to trust other people.

Putnam also examined potential counter-trends. For example, whilst membership of certain organisations might have declined, other groups appeared to have taken their place. In particular, since the 1970s there has been a substantial growth in mass-membership organisations (such as the American Association of Retired Persons, AARP) and support groups (such as Alcoholics Anonymous). Yet these are very different from what Putnam refers to as ‘conventional civic organisations’. For example, for organisations like the AARP the only bond that members have is that they pay club fees; the majority of members never actually meet and most are not active participants. Putnam offers a number of possible explanations for the decline in civic involvement:
• the movement of women out of the home and into the labour force.
• the increased time spent at work thus creating less time for participation in community life.
• the increased residential mobility of individuals and the greater population turnover of neighbourhoods.
• social changes such as the rise in divorce.
• the growth of individualised and privatised activities for leisure such as television.

Are more British people ‘bowling alone’?
A number of researchers have investigated the extent to which Putnam's arguments also hold for countries such as Britain. Peter Hall (1999) looked at empirical data for Britain going back to the 1950s, examining variables such as membership in voluntary associations, charitable endeavours and informal sociability. Contrary to Putnam’s analysis showing a decline in social capital, the same did not appear to be true in Britain. Interestingly, social capital appears to have shown an increase or at least stability over the post-war period. Hall’s (1999) analysis of associational membership found participation among the adult population grew by 44% between 1959-1990, with the greatest increase in 1960. While association in some traditional groups (for example those representing women) had declined, environmental organisations since the early 1970 had quadrupled in membership. Interest in politics and political activism since the 1950s had shown stability, however as in America, voter turnout has decreased. Involvement in charitable endeavours appeared to have increased slightly from 23% in 1981 to 25% in 1992. According to Hall, between 1961 and 1984, the amount of time people spent at work decreased, with more time consequently being available for leisure pursuits outside the home, thus increasing opportunities for informal sociability. Hall (1997: 37) concluded that:

On the positive side, these data suggest that Britain has not seen the overall erosion of social capital that Putnam finds in the United States and, more importantly, they indicate that levels of social capital are not impervious to government action. On the contrary, policy for the delivery of social services so as to sustain and the expansion of educational opportunity can enhance civic involvement. However, much more needs to be done the ensure that those who lack the economic prosperity of middle class life are not also locked out of the social networks that bind mainstream society together an provide access to many personal benefits.
A reliable comparison between Hall and Putnam is made difficult for a number of reasons. Most obvious are the different datasets used in each country. Putnam appears to use different years of the General Social Survey for most of his analysis, while Hall draws from many sources both government and private. Hall also seems to analyse a broader number of social groups, both traditional, long-standing organisations as well as newer ones. Additionally, bias occurs in the inclusion and exclusion of certain organisations. Putnam's main argument for a decline in social capital in the US comes from a decrease in associational membership in church groups and trade unions, and a neglect of newer organisations or informal sociability. Hall’s analysis, while including a variety of organisations, gives little attention to two of the largest forms of associational membership in Britain, specifically trade unions and church groups – both of which have been subject to considerable decline in the post-war period.

Schudson (2000) offers a further perspective on Putnam’s argument of America’s declining social capital. He suggests that the exceptionality of civic engagement can be attributed to historical events rather than declining disengagement. Putnam’s baseline for analysis was the 1940s to 1950s, specifically individuals born between 1910-1940. Schudson argues that this cohort of individuals lived through four years of ‘national military mobilization’ and political stability. These two events were likely to have had an important impact in civic participation. He argues that Putnam may also have overlooked changes in the way in which civic engagement is defined. Specifically, individuals may be less involved in more traditional organisations such as the YMCA but be actively involved in new areas of activity (such as clubs promoting fitness and a healthy lifestyle). The growth of mass-membership organisations, which were largely discredited by Putnam as examples of civic engagement, may by virtue of their mass-membership in actuality have a greater civic impact for members (for example, the Washington-based AARP). Also, individuals may go through episodic involvement, depending on their age, sex, marital status, and work commitments.

Lastly, Schudson argues that the concept of political participation has itself broadened. He suggests that in certain areas people are more civic-minded now, citing the emergence during the final quarter of the twentieth century of anti-smoking,
gay rights, grey power, ecological and pro-life movements. Political scientists have pointed to a fundamental change in the nature the political culture of western democracies since the pioneering studies of researchers such as Almond and Verba (1963). Political culture is no longer defined within the tight boundaries set out in such studies, but is 'more comprehensive than its predecessor, taking in a wider range of human responses and a broader portrait of the 'political'" (Street 1994). Therefore, perhaps what has changed might not be the overall level of civic engagement in America, but rather the semantic understanding and/or the dynamics of what it means to be engaged in civic affairs. This raises questions about the potential need to broaden the initial conceptualisation of social capital as 'membership in voluntary associations dedicated to a variety of purposes ranging from the recreational or social to the religious or political' (Hall, 1999) in which members interact face-to-face and engage in collective action to encompass a more general understanding of civic engagement (which might include informal means of sociability between friends meeting in a coffee shop or membership of a local gym).

**Measuring social capital**

Having developed some of the theoretical ideas arising from academic debates on social capital, it is now useful to explore some of the ways in which researchers have sought to operationalise and quantify this concept. Here it is necessary to consider the demands of the research project on which this paper is based. Many of the urban neighbourhoods in which this research is being conducted have been affected by the issues raised earlier. This applies in particular to declining levels of interpersonal trust, vulnerability to crime and a range of associated social problems, changes in civic engagement, and reduced social participation (Scharf et al., 2002a). In this section we examine some of the issues and measures involved in examining community change as it relates to dimensions of social capital. The purpose of this section, in relation to the research project, is to present some of the instruments that are currently being used to measure concepts associated with social capital. In this context, the research has sought to address such questions as: How might issues such as trust and participation be measured in relation to the situation of older people in deprived neighbourhoods? How might community cohesion be quantified? What type of factors sustain or inhibit the development of social capital?
Lochner et al. (1999) defined and measured four community level constructs related to social capital. These are, 1) collective efficacy; 2) psychological sense of community; 3) neighbourhood cohesion; and 4) community competence. These different constructs are not intended to be mutually exclusive, but rather overlap to cover the varied dimensions of social capital. The approach adopted by Lochner and colleagues offers a useful structure for exploring and understanding the varied elements of social capital.

**Collective Efficacy:** Lochner et al. (1999) offer two definitions of collective efficacy, the first has its roots in social psychology and the other in criminology. The former defines collective efficacy as a ‘sense of collective competence shared among individuals when allocating, co-ordinating and integrating their resources in a successful concerted response to specific situational demands’ [reference Zaccaro et al, 1995: 309 in Lochner et al. (1999) p. 261]. The latter is taken from the work of Sampson et al. (1997), who define collective efficacy as ‘social cohesion among neighbors combined with their willingness to intervene on behalf of the common good’. Both are said to measure collective efficacy on two separate sub-scales, social cohesion and informal social control. The Social Cohesion sub-scale is composed of responses to five statements relating to neighbourhoods, specifically:

<table>
<thead>
<tr>
<th>Social Cohesion (answered on a 5-point Likert Scale)</th>
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<tr>
<td>• people in this neighbourhood can be trusted</td>
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<tr>
<td>• this is a close-knit neighbourhood</td>
</tr>
<tr>
<td>• people around here are willing to help their neighbours</td>
</tr>
<tr>
<td>• people in this neighbourhood generally don’t get along with each other</td>
</tr>
<tr>
<td>• people in this neighbourhood do not share the same values</td>
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The Informal Social Control sub-scale asks participants about the likelihood that their neighbours could be counted on to intervene in the following situations:
Social Control (answered on a 5-point Likert Scale)

- children skipping school and hanging out on the street
- children spray-painting graffiti on a local building
- children showing disrespect to an adult
- a fight breaking out in front of their house
- a fire station closest to their home being threatened with budget cuts

**Psychological sense of community:** Psychological sense of community (PSC) is the most widely studied concept. Buckner (1988) defines it as ‘the sense of belongingness, fellowship, “we-ness”, identity, etc, experienced in the context of a functional (group) or geographically based collective’ (p.773). McMillan (1976) defines it as ‘a feeling that members have of belonging, a feeling that members matter to one another and to the group, and a shared faith that members needs will be met through their commitment to be together’ [McMillan and Charvis (1986) taken from an unpublished manuscript McMillan (1976)]. Later McMillan and Charvis (1986) proposed four elements in their definition of PSC; membership (the sense of feeling part of a group); influence (a bi-directional concept that refers to the sense that individuals matter to the group, and that the group can influence its members); integration (the sense that members’ needs will be met by the resources received through their membership of the group); shared emotional connection (the sense of shared history in the community).

Glynn (1981) developed a three-part community questionnaire to identify ‘a range of behaviors, attitudes, and community characteristics which could be said to represent PSC” (p. 794). In his questionnaire he tries to account for each of the concepts of PSC outlined by McMillan and Charvis (1986). The first part of the questionnaire collects demographic information, part two assesses attitude and behaviour statements on residents’ ‘actual’ and ‘ideal’ perception of their neighbourhood. Glynn suggests that this is important because any discrepancies signify possible areas for change. Part three encompasses a series of open-ended questions relating to community involvement and participation; for example, how many neighbours can you name?; and, what are the names of the organisations to which you belong?
Neighbourhood cohesion: Neighbourhood and neighbourhood cohesion is defined by Lochner et al. (1999) as ‘social interactions by which residents establish social connections that are either personal or at the neighborhood level’ (p. 265). This aspect is addressed by Buckner (1988) in his Neighborhood Cohesion Instrument. The instrument was designed with the aim of measuring three constructs of social capital – neighbouring, neighbourhood cohesion and sense of community. Composed of just 18 items, it is a reasonably quick tool to administer.

Community Competence: Community competence 'can be thought of as the problem solving ability of a community that arises through collective effort' (Lochner et al, 1999: 267), and as such encompasses aspects of individual and community activism. While this represents an important notion, many aspects of the construct are adequately addressed in other social capital measures.

A further consideration is a social capital questionnaire developed by a research team in Australia (Onyx and Bullen, 2000). While initial piloting of the questionnaire contained 68 items, statistical testing and elimination generated eight independent domains of social capital, encompassing 34 questions. This questionnaire goes beyond a simple focus on micro-level social capital resources to include both the meso- and macro-levels. Participants are asked about interactions outside their immediate community to social agency outside their neighbourhoods. Additional questions relate to life satisfaction and self-esteem.

As previously stated by Coleman (1988), social capital is composed of a variety of entities, thus there can be no single guide to its measurement. The strength of each of the above instruments lies in what the researcher(s) wish to measure. Community specific measures are satisfied by using Glynn’s (1981) community questionnaire or Buckner’s (1988) Neighborhood Cohesion Instrument. More global accounts of social capital might benefit from the research techniques adopted by Onyx and Bullen (2000) in an Australian context.

Empirical findings: Health, community life and social capital
Empirical testing of social capital is still relatively underdeveloped. The focus of current research is primarily dominated with the link between aspects of social
capital and health (Kawachi et al., 1988; Rose, 2000; Cattell, 2001; Veenstra, 2000; Health Education Authority, 1996). In this section we examine this link along with recent research that explores the relationship between social capital and community characteristics.

**Health**

Kawachi et al. (1988) analysed responses given on group membership and social trust from the General Social Survey conducted across 39 US States. Findings revealed income inequality was related to both per capita group membership and lack of social trust. States having high levels of social mistrust also had higher rates of total mortality (e.g. death from coronary heart disease, malignant neoplasms, etc.). Path analysis found ‘that the primary effect of income inequality on mortality is mediated by social capital’ (p. 1495). As income inequality rises, the level of social mistrust increases which is associated with increased mortality rates.

Deterioration in the health of persons living in the Russian Federation prompted Rose (2000) to analyse how much social and human capital added to individual health. Human capital (in the form of income and education) was found to account for 18% of the variance in self-rated physical health and 12% of variance in emotional health. For social capital both physical and emotional health accounted for 16%: ‘Together, the influences explained 22.9% of the variance in self-assessed physical health and 19.3% of the variance in emotional health’ (p. 1431). The results of this study may in part reflect the health of the sample, with one in four respondents rating their physical or emotional health as poor or very poor. This rose to almost one in two for physical health of those aged 60 and over, and almost one in three for emotional health for this cohort.

Cattell’s (2001) research examines social networks and social capital as a mediating role in poverty, exclusion, neighbourhood characteristics and health. The research investigated persons living on two deprived housing estates in East London. Cattell found that neighbourhood characteristics and individual’s experiences impacted on social exclusion which in turn affected access to forms of social capital (such as social networks) and were related to poorer health. Neighbourhood characteristics related to the area’s history, employment opportunities, local amenities that work to
foster trust, co-operations, reciprocity and exchange of information. Individual experiences relate to the reputation of the area and the people, which can work to isolate residents from each other. Cattell concludes by arguing that ‘social capital is a useful heuristic tool in understanding the relationship between poverty, place of residence, and health and well-being. On its own however, the concept is not wholly adequate for explaining the deleterious effects of poverty on health’ (p. 1514).

Conversely, Veenstra (2000) found little support for any positive compositional effect of social capital on health among a sample of 534 Canadians. A wide range of social capital constructs were tested: civic participation (e.g. voting, letter writing), social engagement (e.g. socialisation with workmates, attendance at religious services), and social psychological dimensions such as trust and commitment to people in the community and government. Mirroring the findings of Kawachi et al. (2000), Veenstra found that income and education were associated with perceptions of health, but that this was only the case for older people. While civic participation and social psychological indicators were found to be unrelated to health, some of the social engagement variables were related. Socialisation with workmates and attendance at religious services was significant, even after controlling for income and education among all respondents. For older people in particular attendance at religious services and participation in clubs was related to health. Unlike Kawachi et al, this study failed to establish a link between social capital and health. However, a strong statistical relation was found between income, education and perceptions of health. The results from this study have to be viewed with caution as the response rate only reached 40% and in some regions was as low as 25%. Also the variables chosen to measure social capital may not have been particularly relevant to the target population.

In 1996 the Health Education Authority (HEA) in the UK set up a research strategy to investigate the link between social capital and health. The HEA looked at three British datasets, its own Health and Lifestyle Survey (1992 and 1993), the Health Survey for England (1993-1994), and the General Household Survey (1994).
Analysis of these datasets revealed the following patterns:

- with increased age, greater levels of neighbourhood social capital and participation in community activity were found, particularly among older women.
- Social support and social capital were found to vary according to socio-economic characteristics.
- Social support based on contact with friends is more strongly related to good health than contact with relatives.
- Amongst older people, frequency of contact with friends and relatives is likely to be largely dependent upon physical mobility.

The HEA research concluded that the influences of social capital and social support have a much weaker link than socio-economic variables on health than suggested by Veenstra (2000). However, ‘there is some evidence to suggest that individuals living in materially deprived circumstances are also more likely to live in communities low in social capital; the relationship between material deprivation and poor health is weakened by controlling for variation in neighbourhood social capital’ (p. 145-46). This is an important point that merits closer attention in research undertaken in deprived urban areas.

In a small meta-analysis of the link between social relationships and health House et al. (1988) offer some research and policy cautions: “Although social relationships have been extensively studied during the past decade as independent intervening, and moderating variables affecting stress or health or the relations between them, almost no attention has been paid to social relationships as dependent variables” (p.544). Social relationships are also becoming increasingly dynamic with significant changes arising from demographic ageing, rapidly altering patterns of household formation and dissolution, and changes social norms and expectations concerning partnership and marriage. Also important, though not mentioned by House et al, are the growing global disparities in income distribution. This might be significant, as low income has been linked with low levels social capital. Researchers and policy makers will need to consider how to respond to such changes.
Community Life

Of particular relevance to investigations of social capital in deprived areas has been the work undertaken by the Joseph Rowntree Foundation (JRF) on social cohesion and urban inclusion in disadvantaged neighbourhoods. Contrary to what might be expected the research found that these neighbourhoods do not lack social cohesion. In examining the situation in four different areas, researchers found strong bonds of reciprocity between family and friends, informal social support, mutual aid and a close attachment to the area. However, findings revealed a number of problems that worked against some aspects of social capital. In particular ‘there was a strong sense of a ‘community lost’, loss of pride, powerlessness and confidence in some areas because of economic decline and/or closure/deterioration of ‘landmark’ local buildings. Tension existed between different groups of residents, in particular between older adults and young people, and between established residents and those who were relatively new to the area. This experience created divisions within local populations. Lack of community activities and amenities in the area, such as shops, cafes, sports and social facilities, tended to hinder the development of social capital [see http://www.jrf.org.uk/housing/FO4109.htm].

Social divisions affecting communities was also confirmed in the study by Phillipson et al (2001) of three urban areas in England (Bethnal Green, Wolverhampton and Woodford. In the inner city locality of Bethnal Green, for example, white elderly respondents were often antagonistic towards their Asian neighbours, viewing them as symbolising the way in the area had ‘gone down’ or ‘changed for the worse’. On the other hand, it is also the case that older people still felt a strong identification with the area in which they lived.

This sense of attachment had various layers of complexity, especially in relation to the operation of factors such as gender, age and social class. For example, in relation to gender, gerontologists have defined older women as often performing the role of ‘kin-keepers’, sustaining the family not only through care-work, but activities such as letter writing, telephoning, and remembering birthdays. The research by Phillipson et al (1999; 2001) demonstrates, however, that in some instances they may be ‘neighbourhood keepers’ as well, vigilant about the changing fortunes of the localities in which they have ‘invested’ much of their lives (Massey, 1984). This may
help to explain why women expressed concern about what they saw as a deterioration in the community, the particular deterioration of physical capital apparently coinciding with what Putnam (1995) would view as a decline in social capital. But the issues here may be more accurately viewed in terms of what Campbell (1993) and others define as the ‘crisis in public space’, and the conflict between women and men for the control of local areas. Here, and especially in inner city communities, what was viewed as a more threatening environment on the street, was matched by a decline in older women’s physical capacity to deal with the hurdles generated in urban space, notably, for our respondents, broken lifts, litter, cracked pavements, the threat of violence, and (for elderly Asians) racist abuse.

Discussion and Conclusion

Within the context of the research project that forms the basis for this paper, it is important to note that relatively little research on the theme of social capital adopts a gerontological perspective. Relevant issues will be explored in the analysis of data collected for this study. In particular, there is potentially considerable merit in exploring the connections between such diverse concepts as ‘social capital’, ‘social exclusion’ and ‘quality of life’ of older people, especially where they live in disadvantaged localities. An additional issue to consider will be the extent to which changes in social capital are linked to alterations/declines in the level of trust within the communities under investigation. Jane Jacobs (1965:67) summarised the importance of this aspect as follows:

The sum of…casual, public contact at a local level-most of it fortuitous, most of it associated with errands, all of it metered by the person concern and not thrust upon him by anyone –is a feeling for the public identity of people, a web of public respect and trust, and a resource in time of personal and neighbourhood need. The absence of this trust is a disaster to a city street. Its cultivation cannot be institutionalised. And above all, it implies no private commitments.

The question of how the erosion of trust within neighbourhoods (where it occurs) can affect the quality of life in old age is an important aspect for researchers to consider. Trust may be especially important for older people, for example in contexts where they have limited resources and where restrictions (through disability and lack of transport) are placed on their movement around localities. Both these aspects
increase their reliance upon relationships in the immediate locality, and affect the possibility of support being given where needed.

In conclusion, the general theoretical construction of social capital is now well developed and, in some areas, empirically investigated (Putnam 1993, Woolcock 1998). However, its measurement and application to the lives of older people, are less clear cut. We hope that our research can make an important contribution to research into social capital in general and to understanding how it might affect the quality of life of older people in particular. Our investigation of the lives of older people in communities characterised by severe deprivation represents an important test of the salience of this important concept within social and political science.
References

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