

Giving a place a bad reputation can harm its residents' health – unless they're empowered to change it

February 7 2019, by Emma Halliday



Credit: Yaroslav Shuraev from Pexels

From "crap towns" to "shitholes", there's no denying that some places are unfairly tarred with a bad reputation. Sometimes it's the result of

[sensationalised news coverage](#), but in recent years, the rise of "fly-on-the-wall" TV shows such as Benefits Street or Panorama documentaries has also left residents [feeling misrepresented](#), and their communities tarnished.

While [media coverage](#) is a major factor, derisive attitudes toward particular [areas](#) – whether towns, villages or housing estates – can be shaped by just about anyone. As one resident from [our recent study](#) of English neighbourhoods explained that even the people charged with selling properties in their area had negative opinions. "We were actually getting estate agents and mortgage advisers telling us don't move there; don't move to the area."

These kinds of attitudes have very real consequences for locals: there's [a proven link](#) between living somewhere with a bad reputation, and experiencing poorer physical and [mental health](#). This is partly because [neighbourhood](#) stigma is most likely to affect communities which are already dealing with greater socioeconomic challenges and experiencing [health](#) inequalities.

But in [a recent study](#) published in the [Faculty of Public Health's journal](#), my colleagues and I argue that neighbourhood stigma itself leaves residents at risk of discrimination – and that health programmes targeted toward such places may be contributing to this.

Targeting places

This can occur when governments, the NHS and councils repeatedly target certain areas for social programmes – an approach which has been popular for decades, as a means of tackling a combination of interrelated issues in the same place at the same time.

But targeted initiatives also risk stigmatising an area still further, as they

repeatedly [label areas and residents](#) in terms of what's seen to be "wrong" with them; whether that's rates of heart disease or smoking, high crime, poor exam results, unemployment or other factors.

Writing for *The Conversation*, Human Geography professor Loretta Lees has argued that, in some situations, neighbourhood stigma serves political and public sector interests by providing justification for radical neighbourhood intervention such as estate demolition and gentrification.



Credit: AI-generated image ([disclaimer](#))

What's more, work by [researchers in New Zealand](#) points out how health education campaigns do little to shift smoking rates, when they're not sensitive to local context. Smoking is more prevalent among socioeconomically disadvantaged groups. Yet the researchers found

campaigns to get people to quit smoking left residents feeling doubly shamed, for being a smoker and because of their postcode. So, rather than encouraging all people to give up smoking, the campaign risked reinforcing smoking behaviour in deprived areas.

Public health awareness campaigns can be similarly problematic. For example, in 2018, the [Royal Society for Public Health](#) was criticised for [a report](#) which rated the country's high streets from "worst" to "best" for public health.

Critics, including philosopher and writer [Tom Whyman](#), pointed out that this perpetuated stereotypes of areas as "dead-end dumps, places to struggle to get out of rather than work to invest in". Research supports this view – when the media covers [health inequalities](#) without proper sensitivity, it can [kick communities](#) which are already struggling.

Community resistance

In the [Communities in Control study](#) – an independent evaluation of [Big Local](#), a Big Lottery funded programme aimed at giving local people greater control over how money should be spent to benefit their neighbourhoods – my colleagues and I found that residents often acted to promote a more positive portrayal of their area.

Local action ranged from publicity activities to promote good news stories and neighbourhood improvements, to organising festivals to encourage visitors. Residents explained they wanted to challenge external perceptions which affected their neighbourhood economically as well as shaping locals' view of themselves.

Some residents described how service providers, colleagues and even family members living elsewhere saw residential areas as "rough" or "unsafe", even though they had never visited. And one participant in our

study said: "People whose kids goes to the primary schools here are embarrassed or ashamed to have been from the area and we want to change that."

The residents who have to live with these negative perceptions should not be responsible for changing other people's prejudiced attitudes. But initiatives such as Big Local – and other [funding programmes](#) with an ethos of resident participation – show that community priorities based on local experiences of living somewhere need to be more centrally placed in public health decision making [than this has been up to now](#).

Neighbourhood stigma should be a public health concern, especially as the [impact of austerity builds](#), driving cuts to public services and neighbourhood investment. Austerity policies need to be monitored to ensure they do not make [neighbourhood stigma worse](#) – and residents can also act to improve their area's reputation for the better, if they are given the right support.

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