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Participation and wellbeing

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RENEW Northwest is publishing a series of papers based on current good practice in regeneration. They aim to provide leaders, practitioners and professionals in Northwest regeneration with accessible, evidence based summaries of 'what works' in order to inform their own activities. Compiled by a respected researcher in the field, their intention is to draw on current research to challenge current practice and suggest new ways to build sustainable communities in the region.

Summary

Is community activism bad for your health? Everyone agrees that regeneration projects benefit when local people get involved; not many have stopped to ask how such involvement affects the participants.

In an ideal world, people who take an active part in their communities gain confidence and pride from what they do. Everyone wins as the neighbourhood improves and the activists increase their sense of satisfaction from a job well done.

But research summarised by Professor Carolyn Kagan in this report suggests that far from being a source of wellbeing, participation can actually increase stress. It tells of community activists working under unrelenting pressure: isolated, without supervision, coping with local conflict, without time off – and without pay.

By definition, these activists are themselves already under considerable stress from the constant grind of life in an area of deprivation. Their community involvement then often results in them giving hours of emotional support to other group members, who may have been struggling all their lives with poor facilities and living conditions, and sometimes addictions, abuse and even violence.

On the one hand, local people may see the activists as the problem solvers of the community; on the other, their links with the authorities can provoke suspicion or even hostility.

One woman interviewed for this research was working with the police to tackle drunk and disorderly behaviour. She had her windows broken. Another had 'grass' daubed on the side of her house.

The constant hassles and stress can produce burnout similar to that which is well recognised among highly paid executives.

This research suggests two ways to counter such a threat. To start with, it is vital that everyone who gets involved has the information and support they need to make the experience enjoyable and not exhausting, fulfilling and not frustrating. Too often, activists fail to get the access to power and resources that they need.

Second, it is crucial to recognise that there are different approaches to and degrees of participation. Formal participation, such as consulting residents about a regeneration project, is a top-down system that can often result in local needs being defined by the professionals, with little 'ownership' by residents.

Informal participation – a local campaign to save a hospital or parents setting up an after-school club, for example – works from the bottom up. It emerges from the people and is not initiated by a professional or an authority. General participation, such as getting to know the neighbours or attending a local cultural event, is a third type, more low key than the other two but still likely to improve social cohesion and wellbeing.

In any project it is vital for everyone – organisers and participants – to be clear about what kind of participation they are looking for; and to ensure that adequate support and resources are in place for the members of the community actively involved.

● Participation can over-burden some people, causing stress and burn-out, and the very skills, knowledge and energies essential for meaningful regeneration might be lost.

● Participation – both as a form of consultation and as a grass roots movement – needs to be supported if the pressure on some community members is to be relieved.

● Cultural enrichment that offers short term and varied opportunities for participation can contribute to wellbeing, but the converse is also true, where unrealistic expectations or unsympathetic behaviour by professionals or organisations creates problems.

● There is a need for more research and, based on the evidence we already have, a much wider dialogue about the positive and negative effects of participation on wellbeing if we are to ensure positive, effective and sustainable regeneration practice in the future.

'In an ideal world, people who take an active part in their communities gain confidence and pride from what they do'

Introduction

Participation by local people is the cornerstone of social regeneration policies and practices. Few Government policies or programmes fail to set out community engagement as critical to success, whether tackling social inclusion, promoting urban renaissance or improving service delivery. The following useful list[1] summarises the reasons for encouraging participation:

- Community definitions of need, problems and solutions are different from those put forward by service planners and providers.
- Community knowledge is an important resource and widens the pool of experience and expertise that regeneration and renewal strategies can draw on.
- Community participation gives local residents the opportunity to develop skills and networks that they need to address social exclusion.
- Active participation of local residents is essential to improve democratic and service accountability.
- Central government requires community participation in regeneration and neighbourhood renewal strategies.
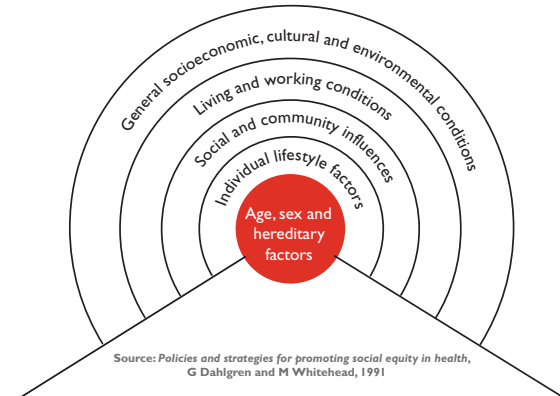
But there is nothing here about whether participation is good for the people who take part. Plenty of research has been done on the physical, environmental and economic benefits of regeneration; little attention has been paid to the psychological aspects.

Wellbeing and living in areas of social and economic deprivation

Wellbeing refers to health in its broadest sense: physical, emotional and psychological. It also includes the development of identity, attainment of personal goals, pursuit of spiritual meaning, prevention of maladaptive behaviours, development of skills, and social support. Wellbeing is closely linked to quality of life and to what is known as 'autonomy of agency', or control over events in one's life.[2]
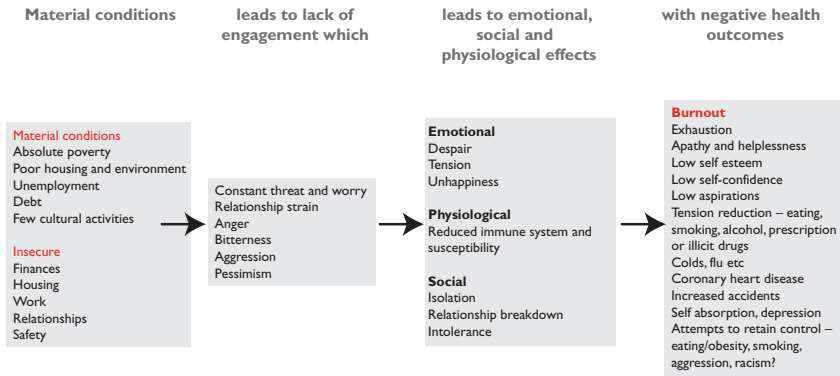
There is plenty of evidence to support the idea that people who live in poverty experience poorer health and are likely to die earlier than other people. Similarly, there is widespread recognition that wellbeing is

Figure 1
The determinants of health (from Wanless, 2004, p25)

Source: *Policies and strategies for promoting social equity in health,* G Dahlgren and M Whitehead, 1991

'Wellbeing refers to health in its broadest sense: physical, emotional and psychological'

affected by many factors, even if individual behaviour is nearly always blamed more than anything else for poor health.[3] Figure 1 illustrates the different layers of influence on health and wellbeing.

Figure 2

Socio-economic stress and its impact on health

Material conditions	leads to lack of engagement which	leads to emotional, social and physiological effects	with negative health outcomes

Such stress can have physical effects, such as a weak immune system, slow physical growth and low height. It also has important psychological consequences that then contribute to poor health behaviours (Figure 2).

The situation people find themselves in is very similar to what is known in the context of stress as burnout. We can argue that people living in areas of deprivation with little in the way of community activity live in a constant state of exhaustion from the daily grind, hopelessness and despair. They are prone to ill health, accidents and relationship breakdown.

To feel depressed, cheated, bitter, desperate, vulnerable, frightened, angry, worried about debts or job and housing insecurity; to feel devalued, useless, helpless, uncared for, hopeless, isolated, anxious and a failure: these feelings can dominate people's whole experience of life… it is the chronic stress arising from feelings which matters, not exposure to a supposedly toxic material environment. The material environment is merely the indelible mark and constant reminder of the oppressive fact of one's failure and of the atrophy of any sense of having a place in a community and of one's social exclusion and devaluation as a human being.[5]

'It seems that socio-economic stress resulting from material deprivation gives rise to poor health'

When we consider health in the context of regeneration, we are clearly talking about the outer layers of influence, particularly those factors linked to the material conditions of poverty and deprivation.

Wellbeing is not so simply related to absolute poverty. Income distribution is the most important factor. The greater the gap between rich and poor, the worse the health of those at the bottom of the social hierarchy. It seems that socio-economic stress resulting from material deprivation gives rise to poor health.[4]

'Participation in collective action may even lead to increased social support'

Participation can contribute to positive wellbeing

At the very least, participation in community life helps prevent social isolation. Participation in collective action may even lead to increased social support, which in turn acts as a buffer against the damaging effects of stress.

This looks like a straightforward link between participation and increased wellbeing. However, we need to look at different forms of participation.

In his book *Participation: the new tyranny?* (edited with Kothari)[6], Bill Cooke argues that there is a difference between 'participation as a means' and 'participation as an end' in social development. Referring to formal participation, such as consultation processes in regeneration, he argues that participation as a means builds a sense of commitment and improves service delivery.

Participation-consultation as a means: Darwen Town Centre Partnership

The regeneration strategy for Darwen town centre recognised the need to strengthen the consensus between local residents and other town centre stakeholders. Every household received a copy of the draft masterplan, a wide range of stakeholders was consulted, and the plan was then discussed at a public meeting. The whole process was overseen by the Darwen Partnership Board, which includes representatives from disadvantaged groups such as the elderly and young people. Decision making was kept informal so as to retain the involvement of the different interest groups.
www.retail-network.org (you need to subscribe to this site to access this content).

Participation as an end, however, increases local people's control over development activities that had previously excluded them.

Participation-consultation as an end: Neighbourhood Learning Project, Blackburn with Darwen Borough Council

The Neighbourhood Learning Project not only encourages residents to say how they would like their neighbourhoods to change, it also teaches them how decisions are made. A learning process based on the work of Paulo Freire aims to bring awareness and understanding, empowering people to challenge service providers about local issues. A 'buddy' scheme ensures that the skills are passed on, and more than 400 local residents have been involved. Local groups now have the knowledge they need to hold key decision makers to account, and this has brought about many resident-led improvements in services and facilities. Those involved have also been accredited for their learning.
www.active-citizen.org.uk/works_details.asp? id=2004820113715&cat=11&parentid=3

There are two other main types of participation in the UK at the moment. As well as formal participation by invitation from above, such as resident task or consultation groups, there is informal, bottom-up participation. Residents' groups that emerge to deal with specific local problems are an example.

Local informal participation often arises through campaigns to retain facilities such as hospitals or schools, or in opposition to planned developments like road schemes. This participation is often short-lived but

may lead to stronger networks, that in turn stimulate other participation networks. The fuel protests of 2001 and the anti-war protests of 2003 are examples of local initiatives that grew into wider movements for change. Bottom-up participation also arises from the wish for positive action – residents may need a local service or additional support, or may combine their energies to help themselves. The crucial thing about this kind of participation is that it is not initiated by an agency, professional or authority. It emerges from the people.

Lastly, there is general participation or involvement in community life. According to the latest census, many more people in the UK are involved in a low key way, on a one to one basis with others, than are in organised community groups. There has also been an explosion of interest in what is known as social capital: the network of relationships and civic involvement that create the conditions for a happier, healthier society. Among its advocates is Harvard University professor Robert Putnam, author of *Bowling Alone*[7], the seminal study on the breakdown and revival of social networks in the United States.

Bodies such as the Organisation for Economic Co-operation and Development and World Bank have accepted the thesis that social capital is at the root of successful communities. The World Bank's definition is that '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 a society – it is the glue that holds them together.' These can include everything from membership of a church, mosque or even an allotment society to taking part in informal five-a-side football games or forming a reading circle.

'This participation is often short-lived but may lead to stronger networks that in turn lead to other participation networks'

'Some of the studies that are emerging into the effects of regeneration on mental health are not encouraging'

Top down participation is only ever likely to involve relatively few people, although those who are involved may well gain better knowledge, understanding and possibly control over decision-making. The prolonged involvement of a few may also lead to different kinds of involvement by many more.

Participation may also lead to increased confidence and skills. These gains are particularly important for young people, and there is some evidence that involving young people in regeneration projects also helps divert them from antisocial behaviour. The two youth projects described below emphasise developing responsibility and a sense of positive citizenship. These are only possible if wellbeing is also improved *(see boxes, below and right)*.

All these examples of participation in practice are relatively new and need to be evaluated in detail,

The participation of young people in regeneration:
Youth Works, Colne, Lancashire

Youth Works is a national partnership that helps 'at risk' young people between the ages of 8 and 25 play a creative role in the regeneration of their communities and in creating safer environments. A partnership between Lancashire County Council and Groundwork East Lancashire worked with young people to plan a range of activities and facilities on a local estate. It had considerable success in reducing youth crime and antisocial behaviour, and many of the young people involved have also found jobs or training places. The key to the project's success was the participation of young people in all the activities.
www.active-citizen.org.uk/works.asp

Rochdale youth projects:
Youth Inclusion Project and Junior Neighbourhood Wardens

Two linked projects in the Langley neighbourhood of Rochdale sought to engage local young people. The youth inclusion project involved outreach work with young people aged 13 to 16, offering them a range of opportunities, particularly at peak times for offending. The young people were involved in the planning and decision making processes. They were offered training workshops and opportunities to take part in community activities and safety projects. One initiative to have arisen from this is the Junior Neighbourhood Wardens Project.
Its aim was to give children aged 9 to 11 a way of contributing to their community, building self respect and developing a sense of responsibility. Young people are given uniforms and asked to record local problems in a book that is then passed to the neighbourhood wardens. The junior wardens also help community groups with activities such as gardening. Family members can become volunteer supervisors. Some young people have taken a real pride in being wardens and the community has developed respect for them, which in turn contributes to positive wellbeing.
www.active-citizen.org.uk/works.asp

especially in regard to how they affect health and wellbeing. Some of the studies that are emerging into the effects of regeneration on mental health and wellbeing are not encouraging.
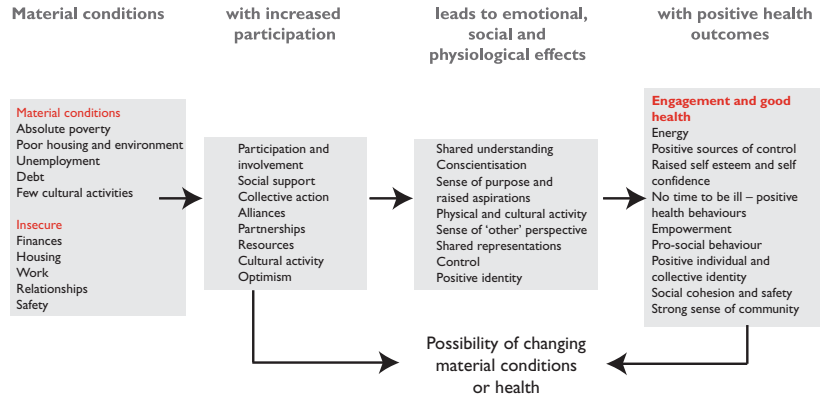
It seems that participation-consultation and involvement that is based on external requirements to involve local people will often proceed too rapidly,

missing the preliminary stages of listening to local people, or failing to build in ways for people to discuss and develop their own awareness and ideas.[8] This results in local needs being defined by the professionals and regeneration workers, who often live outside the area and have labelled a particular neighbourhood as lacking in some way. Local people – who know about invisible strengths, networks and economic activity – may well take a different view.

Other studies that have looked at changes in mental health and wellbeing more generally are also discouraging.[9,10] General participation, such as contact with neighbours or going to a local event, tends to reduce stress, largely because of the social contacts and physical activity involved. It may also improve social cohesion and general wellbeing, but it is unlikely to have a direct impact on people's living conditions. Bottom-up participation and collective action are likely to have the greatest impact on wellbeing and the highest potential for changing the material circumstances of life. This type of participation does several things.[11]

First, through a process we can call *conscientisation*, the group's critical awareness is developed. This may be part of what was happening in the examples from Blackburn and Salford (pages 6 and 7). Second, members of the group re-negotiate their collective social identity and views of the world, sharing information and understanding in a way that increases the likelihood of adopting more healthy behaviours. This may be part of what was happening in Darwen's Partnership Board (page 6). Finally, people's confidence and ability to take control of their

Figure 3

Participation contributing to positive health outcomes

Material conditions	with increased participation	leads to emotional, social and physiological effects	with positive health outcomes
Material conditions Absolute poverty Poor housing and environment Unemployment Debt Few cultural activities **Insecure** Finances Housing Work Relationships Safety	Participation and involvement Social support Collective action Alliances Partnerships Resources Cultural activity Optimism	Shared understanding Conscientisation Sense of purpose and raised aspirations Physical and cultural activity Sense of 'other' perspective Shared representations Control Positive identity	**Engagement and good health** Energy Positive sources of control Raised self esteem and self confidence No time to be ill – positive health behaviours Empowerment Pro-social behaviour Positive individual and collective identity Social cohesion and safety Strong sense of community

Possibility of changing material conditions or health

lives is reinforced, particularly in relation to their health. People are empowered to make changes to their lives, as may be the case in the young people's projects described on page 8 (see Figure 3).

Participation as a threat to wellbeing

In practice, however, bottom-up, active participation and collective action is exhausting. It takes time, energy and perseverance. Not everyone who opts to take part is strong and resilient. They may have been struggling with hardship all their lives. Community leaders and other activists are under relentless pressure. They have no

'People who take an active part often get satisfaction, a feeling of wellbeing and pride in what they do'

supervision, despite working in complex human systems, often with people with extensive personal difficulties. They have no colleagues to share the load when the going gets tough, no working hours, time off or holidays, no development activities built into the role. And they do not get paid.

The Community Psychology Team at Manchester Metropolitan University is working closely with residents who participate in tenants' groups in north Manchester, one of the most deprived areas of the country.[12] These residents are all working hard to improve their areas and to motivate more people to get involved. As a team, we are not measuring wellbeing; we are listening to and recording each others' stories, observing what happens at meetings with professionals involved, and seeing how community participation affects lives in different ways.[13,14,15]

People who take an active part often get satisfaction, a feeling of wellbeing and pride in what they do. Their community involvement 'fills their lives' and they cannot imagine any other way of living. However, they often struggle to get the information and resources to support their work. When they liaise with professionals, they may be treated with suspicion, and sometimes with what they consider intimidation. Other community members sometimes view their involvement with distrust, sometimes with hostility, and at other times with gratitude and praise. Community activists are at one and the same time seen as the problem solvers of the community, and as part of the authorities.

There is extensive media coverage of how some people's lives are destroyed by 'yobbish' antisocial behaviour, crime and vandalism. Community activists are affected by these things too; their wellbeing also suffers. Yet many of the battles they have are with professionals and agencies. Imagine how the pressure on activists increases when authorities encourage the formation of residents' groups and then ask those same groups to

Two activists who are working closely with the police to resolve problems of drunk and disorderly youth pass people in the street who hiss at them 'grass'. One then has her windows broken and two months later the other has 'grass' daubed on the side of her house.

Another community activist has worked hard to involve a group of local people, including children, in campaigning for a clean and high quality environment. One day she shows an environmental officer round the area and points out all the problems. He keeps asking her to report them to the one stop shop – which he manages. 'Do you think I have nothing to do but sit on the telephone all day doing your job for you?' she retorts. 'You have seen the problems – why don't you report it?'

A crime and disorder liaison worker recently wrote to the chair of a tenants' association to ask the members of the group to report to the police any local people who appeared to be 'living beyond their means'.

A community activist was asked to report incidents perpetrated by a 'neighbour from hell' to the housing agency. She ran up a considerable debt on her phone and got no help with paying the bill. What made it worse was that the housing agency did nothing with all the information she supplied.[14]

identify problems, collect 'evidence' against their neighbours – and take action too.
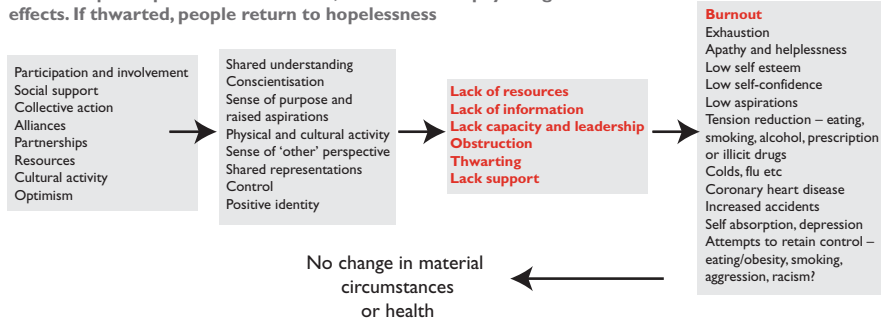
The examples *(see box, left)* illustrate some of the pressures.

Friendships have been fractured amid misunderstanding about who says what to whom, and some people have found little time for their families because they are so busy. We know about the effects of emotional labour (being 'nice', pleasant and supportive all the time), stress and burnout on highly paid executives. I have suggested above that living in an area of deprivation has a similar effect. Far less is known about the emotional labour, stress and burnout in community participation. In our work, however, we have seen community activists who are overloaded and thwarted in their attempts to improve things, leading to burnout and the spread of low wellbeing (see Figure 4).

In order to reduce the danger of burnout, and to improve wellbeing, top down and bottom up participation in regeneration must be supported through information and hard resources. Professional attitudes must change: there must be more openness and social support. Every effort must be made not to overload particular community activists and to ensure

Figure 4

If participation is unsupported, burnout still occurs

Increased participation leads to social, emotional and physiological effects. If thwarted, people return to hopelessness

Participation and involvement
Social support
Collective action
Alliances
Partnerships
Resources
Cultural activity
Optimism

Shared understanding
Conscientisation
Sense of purpose and raised aspirations
Physical and cultural activity
Sense of 'other' perspective
Shared representations
Control
Positive identity

Lack of resources
Lack of information
Lack capacity and leadership
Obstruction
Thwarting
Lack support

Burnout
Exhaustion
Apathy and helplessness
Low self esteem
Low self-confidence
Low aspirations
Tension reduction – eating, smoking, alcohol, prescription or illicit drugs
Colds, flu etc
Coronary heart disease
Increased accidents
Self absorption, depression
Attempts to retain control – eating/obesity, smoking, aggression, racism?

No change in material circumstances or health

people's energies and enthusiasms are renewed.

If participation is going to work, the blocks identified in figure 4 must be removed, not by local people but by the professionals and agencies involved.

Ways of thinking about and supporting participation

As we consider how to encourage participation for wellbeing, we need to take a closer look at the participative process. This will help us clarify what effect on wellbeing we would expect from it, and reflect carefully to see if this has been achieved.

David Wilcox, in his *Guide to Effective Participation*,[16] suggests five levels, or stances towards participation, that offer increasing degrees of control to the people

'In order to reduce the danger of burnout, and to improve wellbeing, top down and bottom up regeneration must be supported'

involved. Figure 5 summarises the five levels. Being clear about what type of participation is expected or encouraged will help to ensure that people's expectations are not raised falsely, which is important as blocked expectations can be perceived as obstruction and contribute to frustration and stress.

The community psychologist Maritza Montero, who writes from a Latin American perspective, discusses participation from the point of view of those who are participating.[17] She conceptualises participation as a process closely connected to the concept of 'commitment', rather than a linear ladder with its metaphor of higher and lower forms of participation.

Montero pictures a dynamic system of concentric circles with the nucleus of maximum participation and commitment at the centre. The circles radiate through different levels of participation-commitment to the outer layer of positive friendly curiosity with no commitment (see Figure 6).

For Montero, participation is a dynamic system. Individuals or groups can move in and out. Part of the task of trying to encourage participation is to enable movement from the outer to the inner levels, and another part is to support those at the inner levels so that they are able to retain their levels of commitment.

This paper has already discussed how there are different kinds of participation in the UK, ranging from complex projects with opportunities for involvement in many different ways over a period of time, to smaller, simpler projects aimed at one group for a particular purpose. In our work, we have found it useful to think of participatory work along two dimensions of participation (proactive and passive) and commitment (high to low).

We can then map different activities and degrees of involvement along these dimensions, as in Figure 7. Here we can position the types of participation required by policy (similar to Wilcox's levels) as well as participation roles in practice (similar to Montero's positions in the participation space).

Community activists, who identify their own needs and set their own agendas and often find their own strategies for achieving change, are in the proactive participation, high commitment quadrant. Community members and representatives who work in partnership with agencies on policy agendas can also be situated in this quadrant.

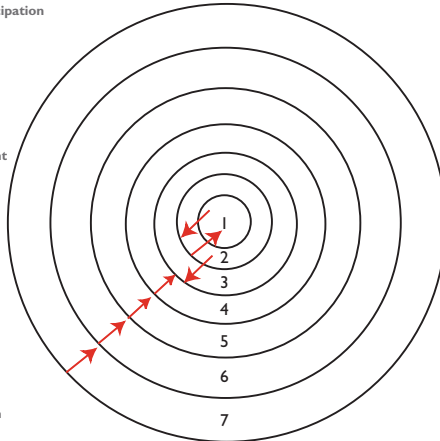Self-appointed community representatives who get co-opted into processes with agendas set by professionals

Figure 5

**Levels of participation (Wilcox, 1994) –
levels 3 to 5 involve substantial participation**

Level of participation	Activity
1. Information	Tell people what is planned
2. Consultation	Offer a number of options and listen to the feedback
3. Deciding together	Encourage others to provide some additional ideas and options, and join in deciding what is the best way forward
4. Acting together	Not only do different interests decide together what is best, they also form a partnership to carry it out
5. Supporting independent community initiatives	Others are helped to do what they want – perhaps within a framework of grants advice and support provided by the resource holder

Figure 6

Levels of participation and commitment in the community (Montero, 2004)

1. **Nucleus of maximum participation and commitment**
2. **Frequent participation and high commitment**
3. **Specific participation, medium commitment**
4. **Sporadic participation, low commitment**
5. **New and tentative participation, low commitment (eg financial donation, support material)**
6. **Tangential participation, unclear (eg approval, agreement)**
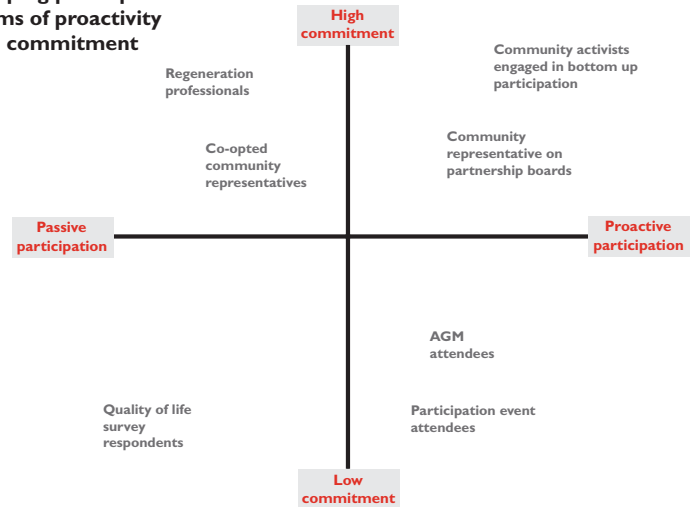7. **Positive, friendly curiosity. No commitment.**

People moving in and out with greater or lesser levels of commitment

Figure 7

Mapping participation in terms of proactivity and commitment

High commitment

Regeneration professionals

Community activists engaged in bottom up participation

Co-opted community representatives

Community representative on partnership boards

Passive participation

Proactive participation

AGM attendees

Quality of life survey respondents

Participation event attendees

Low commitment

could be situated in the proactive participation, low commitment quadrant. Professionals who are committed to working on community issues but who work weekdays only and go home at night can also be placed in this quadrant.

This mapping of participation and commitment can be useful for exploring movement over time, and for identifying those most at risk of stress, disaffection or burnout.

There are other ways in which increased participation might be recognised. Fraser and Lepofsky have some suggestions about how those defined as 'experts' in the participatory process can boost resident-driven initiatives for change.[18] These include:

● Questioning definitions of expert and resident
● Legitimising alternative forms of collective action by neighbourhood residents (for example, situations whereby 'experts' are not always intermediaries through which residents must act)
● Using research methods that give voice to residents' concerns (particularly as such concerns might conflict with each other and with initiatives' goals)
● Pursuing techniques that use forms of knowledge that are hybrids between 'expert' and 'local'
● Documenting the process of the initiatives to understand when practices are operating progressively

'Most people participate in their communities not as part of organised groups but in doing acts of kindness'

to relieve poverty and when they are not.

They suggest that these activities can

…contribute to situating community-building experts more deeply as part of the community they help build, and therefore increase the responsibility and obligation they feel towards the community, whilst increasing the trust residents have towards 'external' stakeholders (p.11)[18]

This still sounds like a professional-oriented purpose, albeit one that might shift well-meaning professionals like regeneration workers towards the high commitment quadrant in our mapping diagram.

We must not forget the third type of participation – general participation. Most people participate in their communities not as part of organised groups, but in doing

acts of kindness, or just spending time with others on a one to one basis. This requires us to look beyond immediate needs for regeneration to the very fabric of social life and the re-acculturation of vast areas of life in the UK that are culturally barren.

We need to put the emphasis back on people, not traffic; on the use of public and open spaces, not just buildings; on social contact not just consumption; on celebration not just despair; on the generation of art and entertainment, not just the passive receipt of the mass media. The list could go on.

A change of thinking that will challenge priorities in urban development might need us to rethink how we encourage and identify formal and informal participation. We might need to target resources on more intangible social outcomes. Perhaps we should make wellbeing the top priority for public services and private enterprises. This is a matter that affects us all.

In terms of quality of life which is ultimately a matter of people's subjective sense of wellbeing, the psycho-social processes round inequality, social cohesion and its effects on health, are overwhelmingly important. They are important not only from the point of view of those low down the social scale who suffer them most, but also because of the deterioration of public life, the loss of a sense of community and particularly the increase in crime and violence, are fundamentally important to the quality of life for everyone.[19]

Conclusion

Participation can improve quality of life and wellbeing for people who live in areas of deprivation. But we must not

lose sight of a number of lessons that experience has taught us.

In any project it is vital for everyone – organisers and participants – to be clear about what kind of participation they are looking for; and to ensure that adequate support and resources are in place for the members of the community actively involved.

● Participation can overburden some people, causing stress and burn-out, and the very skills, knowledge and energies essential for meaningful regeneration might be lost.

● Participation – both as a form of consultation and as a grass roots movement – needs to be supported if the pressure on some community members is to be relieved.

● Cultural enrichment that offers short term and varied opportunities for participation can contribute to wellbeing, but the converse is also true, where unrealistic expectations or unsympathetic behaviour by professionals or organisations creates problems.

● There is a need for more research and, based on the evidence we already have, a much wider dialogue about the positive and negative effects of participation on wellbeing if we are to ensure positive, effective and sustainable regeneration practice in the future.

It is one thing to understand participation and its effect on wellbeing in theory. It is perhaps another to understand the reality. Bill Cooke has written that regeneration professionals need to practise what they preach.[20] Only when they themselves undergo the procedures they 'inflict on others' will they understand how it feels to be a participant. Everyone who expects others to participate should themselves participate in their own home and work communities. ■

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Professor Carolyn Kagan is Professor of Community Social Psychology at Manchester Metropolitan University. Throughout her career she has worked on action research projects in community settings, in pursuit of greater social justice with those marginalised by the social system.

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• pioneering projects based on citizen advocacy principles with disabled people
• influencing social policy through researching how families with disabled children manage to combine work with caring
• ways of enabling people living in poverty to share their experiences
• understanding and promoting ways of enabling the participation of citizens, in the context of regeneration, that will not damage their mental health
• researching and advising on organisational change in public services so that they facilitate independence of the clients they support.

She has worked with agencies supporting families with disabled children in the slums of Kolkata, India, as well as with community activists in the barrios of Caracas, Venezuela. She is a qualified social worker and chartered counselling psychologist.

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