

Business Case

The below sets out the Business Case for the South East Coastal Communities project and why the Swale area was chosen as a case study.

The Kent Thames Gateway sub-region has:

- A relatively young population, with the second highest proportion under 15 years (19.5% compared to 18.0% for the South East) and only 16% aged 65+ ;
- The highest mortality rates from all causes, cancers and circulatory diseases, plus lowest life expectancy in the South East;
- High levels of teenage conceptions (42 per 1,000 compared to the South East average of 34 per 1,000);
- For lifestyle factors, it is estimated that this sub-region has the highest smoking rates, and the lowest levels of healthy eating in the South East.

(Source: Draft RSS for South East England, Public Consultation November 2006 to March 2007, South East Coast NHS).

- Whilst HEKAM effectively represents the whole of Kent (and for the purposes of this bid the whole of the Kent coast), the unique collaboration of the Universities at Medway was based on a philosophical understanding of the role that the higher education institutions might play in social and economic regeneration. The decision to concentrate the proposed work of this business case on Swale results from the geographical proximity to the Medway Campus.
- The *Fit for the Future: delivering the South East Coastal Communities project in Swale* is a collaborative venture between the three universities that comprise the *Universities at Medway* (Canterbury Christ Church University, the University of Greenwich and the University of Kent) in association with a range of organisations in Swale including Swale Forward (the main regeneration partnership operating in Swale), the Gateway Knowledge Alliance and the voluntary and community sector (see list of partners in Section E). The universities will work in partnership with the local community to improve their health and well-being through the transference of practical knowledge and expertise in public health and health promotion in its broadest sense. This investment of intellectual capital is expected to support the Swale community to maximise on planned regeneration in the area and to provide new services and activities which will improve the health and well-being of those living in the area, and in the longer term result in reduced morbidity and premature mortality. However, it is also expected that the partnership between higher education and community stakeholders will result in a two-way exchange of knowledge and experience, creating a virtuous cycle of knowledge sharing.
- The Universities at Medway have extensive experience of working with their local communities and with each other in areas such as social exclusion in schools, geographical inequalities in health, arts and health, environment and health, organisation and delivery of healthcare, voluntary sector and social enterprise activities, etc. They have expertise in a range of key relevant disciplines including: public health (all three universities), architecture and design (Universities of Greenwich and Kent), engineering (University of Greenwich) sports science (all three universities), social policy and related subjects (Canterbury Christ Church University and University of Kent), education (Canterbury Christ Church University and University of Greenwich) and crime and policing (Canterbury Christ Church University and University of Kent) and the sociology of crime and fear of crime (University of Kent).
- Local HEIs are also active partners in a number of key projects in Swale, such as the new Kent Science Resource Centre at Kent Science Park and the development of the heritage and cultural centre at Flying Start on the Isle of Sheppey. The universities have jointly established the Gateway Knowledge Alliance (GKA) in partnership with

the education authorities in North Kent, FE providers, CLG and SEEDA. GKA is designed to co-ordinate the response of the learning and skills community to regeneration. It also has a service level agreement with Swale Forward (the local regeneration partnership) to deliver the Swale Learning Strategy.

Evidence of demand

- The Kent team has chosen to focus attention on Swale for the initial phase of the project for the reasons set out below. The newly established collaboration between the three HEIs at Medway forms the context for the proposal, Swale being in close proximity to the Campus. Clearly there is scope for replication of the work in other coastal areas of Kent, including Thanet, Folkestone and Dover. Within Thames Gateway Kent, SECC investment is particularly targeted at Swale, as an area which currently has no locally located higher education presence, but which has significant regeneration opportunities and challenges which the support of the HEIs in community development will help to address. This section sets out the opportunities and challenges that Swale faces, and highlights the contribution that SECC funding can make.

The State of Swale

- Swale is located at the eastern end of the Thames Gateway, approximately 40 miles from central London. The Borough is diverse, containing both well-connected urban and rural settlements and some of the South East's most isolated coastal communities.
- Our stakeholders have suggested that Swale faces many challenges, which need to be addressed as part of the Borough's regeneration strategy:
 - Swale's poor performance in education and skills, which hampers the ability of local residents to access higher-value jobs and limits the attractiveness of the Borough to employers demanding higher skills;
 - The existence of pockets of social and economic deprivation, some of which are among the worst in the region;
 - Structural changes in the local economy and the need to manage the transition from dependence on sectors requiring a low skills base to higher-value, knowledge-based employment;
 - Ensuring that population and housing growth is environmentally sustainable and is accompanied by high quality public services, infrastructure provision and job opportunities;
 - The existence of poor quality environments at local level in some parts of the Borough;
 - The need to maintain and enhance the quality of the natural environment and countryside;
 - The diversity of the Borough, and the need to recognise that approaches to regeneration and priorities at local level vary across the Borough;
 - Managing constraints on development, such as flood risk and limitations on water supply, and ensuring that measures are put in place to ensure that new developments are sustainable in the long term;
 - Reversing the negative perceptions of the Borough that frequently exist, both within and outside Swale;
 - Raising aspirations to help Swale make the most of the opportunities it has on offer;
 - Swale's relatively underdeveloped third sector organisational infrastructure;
 - The regeneration processes currently taking place within the Thames Gateway will lead to an increase in population size, diversity and mobility;
 - These population changes are likely to have a very direct impact on the need for community infrastructure.

- A summary of the economic, social and environmental state of the Borough is set out in the *State of the Borough Report*, produced in 2006. Overall, the *Report* demonstrates that there are few areas in which the Borough is performing particularly well relative to other districts, and several in which it is particularly poor. Most strikingly, the poor scores in terms of education and skills have the potential to hold back the Borough's economic and social development. Health and well-being indicators are also especially poor, with Swale in the bottom quintile of local authority districts in both the South East and Kent and Medway.
- Swale's overall deprivation ranking masks localised concentrations of severe deprivation. Many of the Borough's most deprived communities are contiguous to areas of new housing and employment development, and it is critical that existing communities have access to the opportunities that these new developments present if regeneration is to be genuinely sustainable.
- The table below indicates all those Super Output Areas in Swale with Index of Multiple Deprivation scores of 30 or more: of these, four are in the 10% most deprived SOAs in England, and a further nine are in the 20% most deprived:

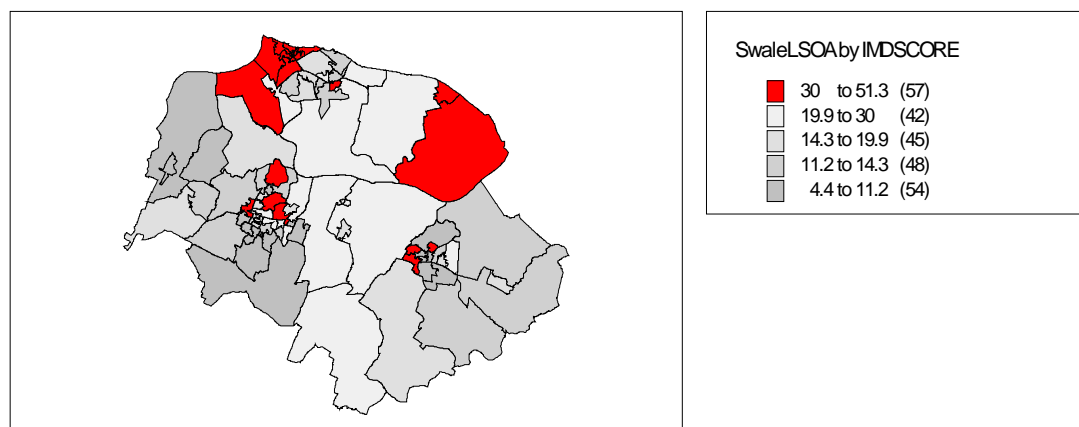
Fig. 3: Index of Multiple Deprivation by Super Output Area¹

Rank	SOA Ref	Ward	IMD score	Rank of IMD
1	E01024609	Sheerness East	51.22	2072
2	E01024580	Leysdown & Warden	50.69	2163
3	E01024614	Sheerness West	50.00	2307
4	E01024615	Sheerness West	48.69	2541
5	E01024613	Sheerness West	45.06	3274
6	E01024590	Murston	44.97	3295
7	E01024597	Queenborough & Halfway	44.86	3327
8	E01024621	Sheppey Central	43.67	3601
9	E01024563	Davington	36.73	5645
10	E01024579	Kemsley	36.63	5676
11	E01024581	Leysdown & Warden	36.54	5704
12	E01024610	Sheerness East	35.74	5951
13	E01024616	Sheerness West	34.54	6381
14	E01024584	Milton Regis	33.87	6633
15	E01024627	Watling	32.06	7306
16	E01024567	Grove	31.17	7643
17	E01024611	Sheerness East	31.02	7711
18	E01024612	Sheerness East	30.81	7792
19	E01024604	St Ann's	30.03	8119

- Comparing the spatial distribution of overall deprivation within Swale with that in the health deprivation and disability domain, there is clearly a high correlation between the two, indicating the relationship between ill-health and wider issues of economic and social disadvantage:

¹ Super Output Areas (SOA) are the smallest statistical areas against which the IMD datasets are measured. Source: Office of National Statistics, 2004

Fig 4: Distribution of Multiple Deprivation across Swale²

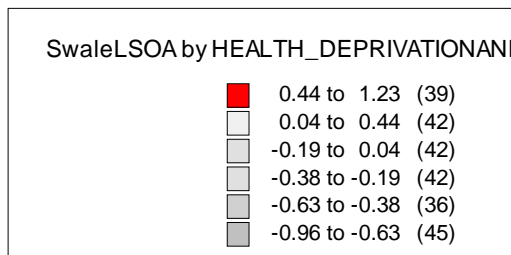
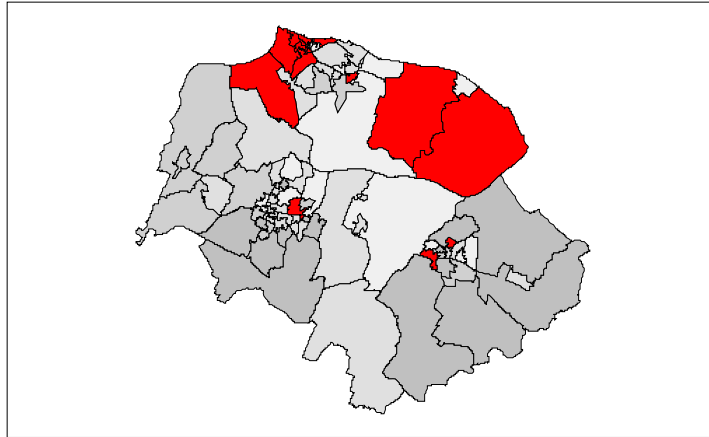


- Both in terms of overall deprivation and health deprivation there are particular concentrations within Swale in urban and rural western Sheppey (Sheerness, parts of Minster and Queenborough and Rushenden), north Sittingbourne, some areas of Faversham and much of the eastern part of the Isle of Sheppey. In rural parts of the borough and in eastern Sheppey in particular levels of deprivation are aggravated by specifically local issues, such as population and employment seasonality, physical isolation and lack of services which is exacerbated by a poor transport infrastructure.
- Considerable investment is being made in improving health and well-being opportunities in Swale. The Seashells Children's Centre at Sheerness, for example, was completed in 2006 with funding of £2.5 million through DfES, the Government's Thames Gateway programme and other sources. Seashells has been highly successful, and is nationally regarded as an exemplar Sure Start facility. A further round of Children's Centres are currently being developed in Swale, and will begin delivering services in 2008.
- An example of joint intervention is in Queenborough and Rushenden on the Isle of Sheppey. Queenborough and Rushenden currently has a population of about 3,100, but over the next twenty years it is envisaged that up to 2,000 new homes, 180,000 square metres of new employment space – creating up to 1,000 jobs and a new marina, school, public square and health centre - will be developed as part of a comprehensive master plan. This area is of particular interest because SEEDA and other partners established a Community and Skills Group, comprising residents, town and borough councillors and housing association representatives and have undertaken a 'Planning for Real' consultation in which over 1,000 residents contributed to setting short, medium and long term goals for the future of their community in the context of new development. Building on this work, two of the HEI partners in this bid (Canterbury Christ Church and Kent Universities) provided intellectual capital to support the residents to build on their existing 'political voice' in order to ensure that their needs were being met and to enable them to articulate their demands. Ongoing engagement with this community and its representatives through focus groups and workshops highlighted the potential value of knowledge transfer associated with public health skills, capabilities and resources with the community. A need for the community to be supported and encouraged to become activists in changing factors affecting their health was clearly articulated in these meetings.
- However, the need for further investment at community level to support health and well-being in a general sense is well-recognised. The Swale Regeneration

² ONS, 2004

Framework acknowledges the need for additional investment in both capital and revenue provision, through its Investment Priorities within the Community and Neighbourhood Regeneration strategic theme³. The Framework in particular notes the importance of neighbourhood-based intervention based on a full understanding of the distinct needs of local communities.

Fig. 1: Distribution of Health Deprivation & Disability across Swale⁴



³ Swale Regeneration Framework 2006-16: Swale Forward, 2006 (pp 52-59)

⁴ ONS, 2004