



University of
Southampton

MONEY ISN'T EVERYTHING

**Understanding Deprivation and
Hidden Vulnerabilities across
Hampshire and the Solent**



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INTRODUCTION

While Hampshire and the Solent area may fare well in traditional measures of affluence and material or social deprivation, there are populations within our area that are significantly vulnerable in one or more ways.

These vulnerabilities are wide ranging and go beyond what might be a popular perception of deprivation and its focus on income, as reflected in the official Index of Deprivation. They include issues such as homelessness or poor quality and unsafe housing conditions; limited access to reliable public transportation; limited or no access to affordable and healthy food; persistent exposure to air pollution; and untreated mental health issues. Residents experiencing these multiple vulnerabilities can also find it hard to engage in employment, training or education, perpetuating inequalities in income and health.

Understanding the causes and routes out of both “traditional” deprivation and wider vulnerabilities is not only good for the individuals and communities affected, but the economic

productivity and success of the region as well. The importance of reducing inequalities to improving economic growth is well-established, as is the relationship between population health and economic prosperity. For example, Joseph Stiglitz has argued that excessive inequality tends to lead to weaker economic performance. In his discussion paper, David Bloom states that, although the relationship between a nation’s health and economic performance is complex and two-way, “the data clearly reveal a strong positive correlation between health and GDP. Countries with better health status tend to have higher incomes than countries with worse health status.”

We all have an interest in addressing deprivation in all its forms. This work, developed by the University of Southampton and in consultation with its regional civic partners, will highlight the breadth of deprivation and vulnerabilities across our region alongside opportunities to better support these communities and improve health, wellbeing and prosperity in our population.



We draw on familiar measures of deprivation such as the Government's Indices of Deprivation, updated in 2025 and pertinent research carried out at the University of Southampton.

These diverse sources of evidence highlight the need for regional public policy makers to have a bespoke and imaginative response to deprivation. As evidence collected for "Making ends meet - the lived experience of poverty in the South" puts it:

"Public policy must respond to a wide range of issues. These not only cover well-recognised challenges such as the provision of social housing and the need for a labour market that can offer better opportunities for progression and more secure employment, but also relatively neglected issues such as the provision of cheap and convenient transport and the maintenance of an inclusive and affordable 'high street' as a hub of community life."



How to Read this Report

This report sets out to provide an overview of some evidence on deprivation and hidden, often overlooked manifestations and causes of deprivation, in our region.

It brings together a sample of the existing research that is relevant to the topic and applies across Hampshire and the Solent. The report does not intend to be the final say on the subject. It is intended to pique the interest, curiosity and concern of both those with a professional familiarity with and expertise in the subject, and those who have influence, interest and a stake in ensuring opportunities for health, wealth and a good standard of living are open to all our communities.



EXECUTIVE SUMMARY

Identifying Deprivation – Different Approaches

The government's Index of Multiple Deprivation (IMD) is an important measure of material and social deprivation in urban communities, not least because the Index is used to assess need and target significant public investment and funding.

However, the Index falls short as a comprehensive indicator and understanding of deprivation in areas which are a mix of urban and rural. This is highlighted in the most recent version of the IMD by addressing rural deprivation separately in its own supplementary report.

In areas of mixed urban and rural vulnerable populations can be harder to detect through composite measures which prioritise deprivation in income and employment and place less emphasis on access to services.

There is a stark difference between looking at our region through the lens of deprivation, which measures income and employment and looking at

it through alternative measures such as barriers to housing and key services (see Figures 1 & 2 below).

In both types of measures, findings should be complemented with accounts of lived experience to deepen analysis and understanding of deprivation.

Policy makers need to have a pluralistic approach to analysis of deprivation and interventions.

Adopting new ways of devising and designing policies such as deliberative democratic methods are important for an authentic appreciation of deprivation. These focus on enabling community empowered public policy and delivery of services.



Main Findings of This Report



Hampshire, Portsmouth, Southampton, and the Isle of Wight are largely characterised by mixed populations in terms of income.

The urban areas, particularly Andover, Basingstoke, Portsmouth, Southampton include neighbourhoods with high levels of deprivation entrenched across generations, as measured using the IMD.

However, most of Hampshire is rural, and deprivation in rural areas risks being overlooked if our measure relies solely on the standard IMD.



Two major themes and policy areas emerge from the research findings and analysis: transport and housing. They are both the problem and the solution.

We see from the evidence how inadequate, inaccessible or unaffordable public transport contributes to rural poverty; increases social isolation; and creates barriers to accessing employment, training, education and other services.



Road vehicles are identified as major causes of air pollution, particularly in densely populated urban areas. This pollution is associated with extensive health issues, both physical and mental, and impacts the most deprived disproportionately.



Housing and access or no access to good and affordable accommodation are also both inhibitors and enablers of ensuring people across our region can feel safe, secure and are able to reach their potential.



Rural homelessness is a growing problem that requires specific, locally informed and properly funded policy interventions that are different from those in urban areas. Without active interventions and good preventive services rural homelessness will keep increasing.



POLICY SUGGESTIONS

A single intervention might have multiple positive outcomes such as reducing numbers of cars on our roads and improving public transport might help reduce social and economic isolation; improve air quality and reduce noise pollution and its impact on poor mental health.

Devolution, the creation of a Mayoral County Combined Authority and, in time a Mayoral Strategic Authority present some opportunities for improving the impact of policy interventions where a more strategic approach is appropriate and current delivery is fragmented or patchy in quality.

We suggest four main “policy game changers” for tackling deprivation:

1 Measure and assess the type and occurrence of deprivation with an awareness of the local context

Understanding the occurrence of deprivation within coastal and rural areas, as well as barely visible pockets

2 Diversify ways of making policy embracing methods of community empowerment

Develop a training programme for policy makers on diverse approaches to community empowered policy design and implementation. This should include understanding the value of deliberative democratic methods as a route to a more authentic appreciation of regional deprivation and policy solutions that are more likely to work. The outcome of enabling community empowered public policy and delivery of services is more cost effective and successful policy solutions.

Acknowledge different approaches to rural and urban issues.

3 Transport

Develop a Regional Transport Strategy and Action Plan with a focus on ending rural poverty, concessionary fares, and improving public health and reducing air pollution.

4 Housing and Accommodation

Implement Renters’ Rights Bill.

Push for review of housing benefit policy to better reflect local rent market.

PART ONE:

The Evidence

Section 1: Embedded intergenerational deprivation

Hampshire, Portsmouth, Southampton, and the Isle of Wight are largely characterised by mixed populations in terms of income. The urban areas, particularly Andover, Basingstoke, Portsmouth and Southampton, include neighbourhoods with high levels of deprivation as measured using the Index of Multiple Deprivation (IMD). This is the go-to measure used to determine where people may struggle to achieve their best outcomes due to constrained circumstances (Figure 1). The IMD also drives funding decisions for additional support. This IMD works well to represent deprivation in urban communities where material and social deprivation is often entrenched across generations.

The 2025 Index of Multiple Deprivation

The Indices of Deprivation is the collective name for a group of 10 indices that all measure different aspects of deprivation, although the most widely used of these is the Index of Multiple Deprivation (IMD). The IMD is a combination of the seven indices shown below (Figure 1) to give an overall score for the relative level of multiple deprivation experienced in every neighbourhood in England. There are 33,755 areas (lower super output areas) in England. They are ranked with 1 meaning most deprived.

Area (Number of LSOAs in each area are in brackets)	No. of LSOAs in the 10% Most Deprived areas in England	No. of LSOAs in the 11%-20% Most Deprived areas in England
Hampshire and the Solent (1,231)	52	82
Hampshire & two cities (1,079)	49	67
Hampshire County area (865)	16	33
Isle of Wight (89)	3	15
Portsmouth (125)	15	15
Southampton (152)	18	19
Basingstoke and Deane (115)	0	2
East Hampshire (74) ^w	0	0
Eastleigh (82)	0	1
Fareham (73)	0	2
Gosport (56)	5	10
Hart (59)	0	0
Havant (79)	9	11
New Forest (114)	2	1
Rushmoor (60)	0	3
Test Valley (81)	0	2
Winchester (72)	0	1



Income



Employment



Health &
Disability



Education
Skills &
Training



Barriers
(Housing
& Services)



Crime



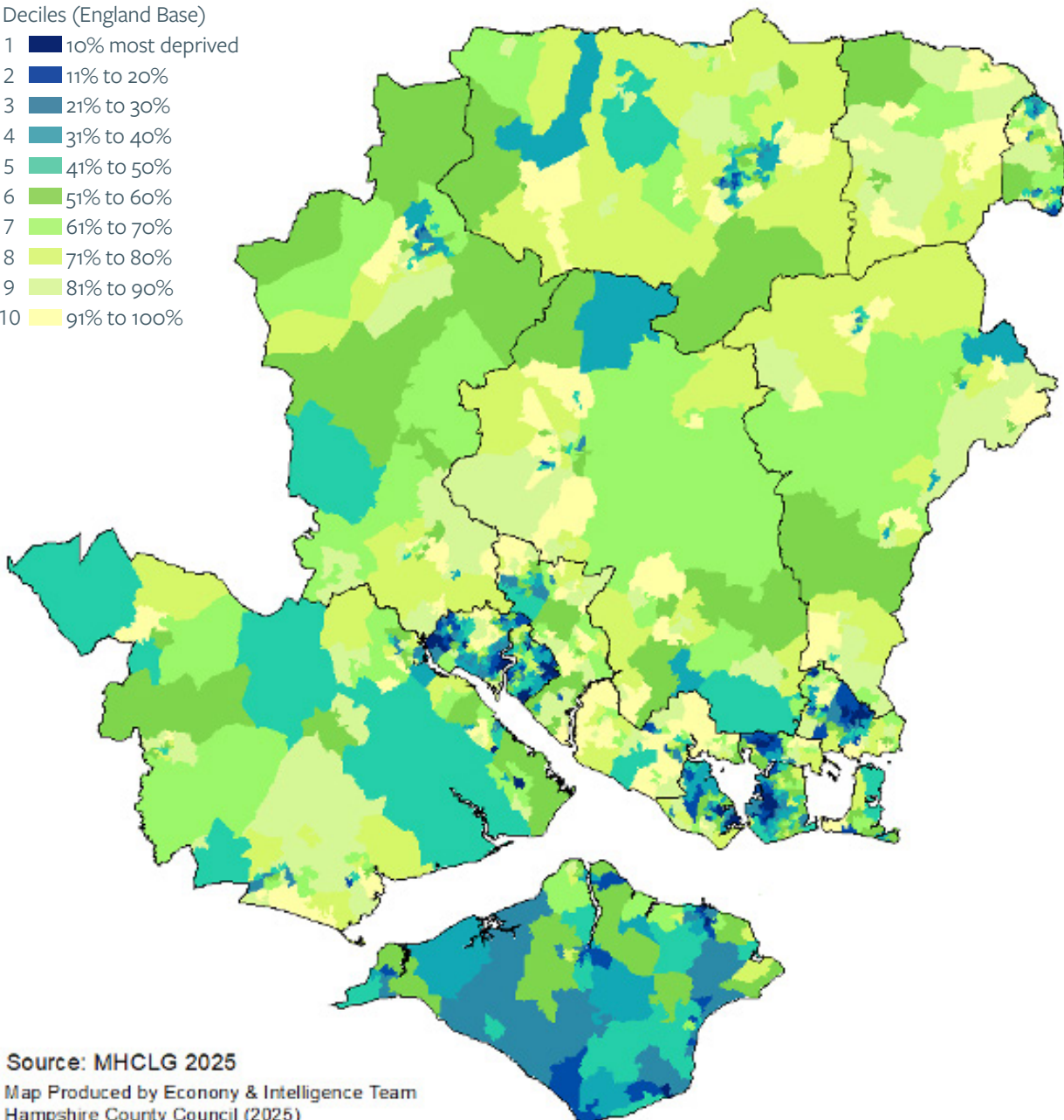
Living
Environment

Legend

Deciles (England Base)

- 1 10% most deprived
- 2 11% to 20%
- 3 21% to 30%
- 4 31% to 40%
- 5 41% to 50%
- 6 51% to 60%
- 7 61% to 70%
- 8 71% to 80%
- 9 81% to 90%
- 10 91% to 100%

Figure 1: 2025 IMD score for Hampshire & Isle of Wight



Source: MHCLG 2025

Map Produced by Economy & Intelligence Team
Hampshire County Council (2025)

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Section 2: What do the 2025 IMD domains tell us about the parts of Hampshire and the Solent where less obvious vulnerabilities are experienced?

In other areas, which are more rural, vulnerable populations may be harder to detect through composite measures which are weighted towards income and employment deprivation and place less emphasis on access to resources. The need to recognise alternative realities of deprivation is reflected in the newer Rural Report released in 2025.

This report throws light on vulnerabilities in non-urban areas by looking at subdomains of the IMD score such as the Barriers to Housing and Services. Here, the challenges of accessing resources like GPs, affordable food, and schools in rural areas is clear (see Figure 2).

The difference between looking at our region through the lens of material and social deprivation and that of barriers to housing and key services is remarkable. On the two different maps the geographical places of concern are almost reversed.

The 2025 Index of Barriers (Housing & Services)

The Index of Barriers to Housing and Services measures the physical and financial accessibility of housing and key local services. The indicators fall into two sub-domains: 'geographical barriers', which relate to the physical proximity of local services, and 'wider barriers' which includes issues relating to access to housing such as affordability. There are 33,755 areas (lower super output areas) in England. They are ranked with 1 meaning most deprived.

Area (Number of LSOAs in each area are in brackets)	No. of LSOAs in the 10% Most Deprived areas in England	No of LSOAs in the 11%-20% Most Deprived areas in England
Hampshire and the Solent (1,231)	85	87
Hampshire & two cities (1,079)	62	79
Hampshire County area (865)	59	60
Isle of Wight (89)	23	8
Portsmouth (125)	1	7
Southampton (152)	2	12
Basingstoke and Deane (115)	10	13
East Hampshire (74)	8	8
Eastleigh (82)	0	0
Fareham (73)	0	1
Gosport (56)	5	9
Hart (59)	2	4
Havant (79)	0	1
New Forest (114)	9	12
Rushmoor (60)	1	2
Test Valley (81)	15	3
Winchester (72)	9	7

Measures: Geographical Barriers:



Connectivity score



Housing affordability



Household overcrowding



Homelessness



Broadband speed

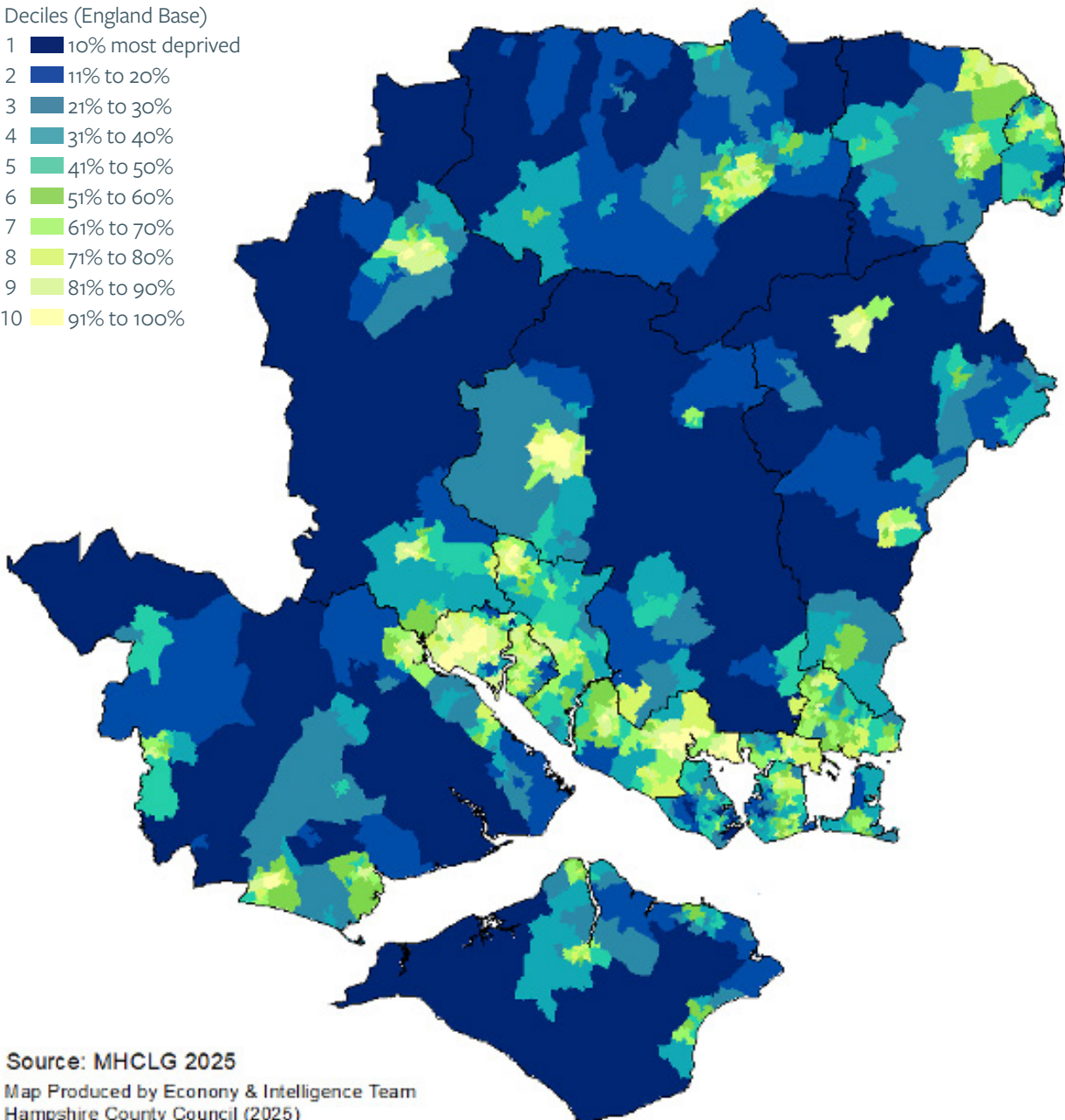


Patient-to-GP ratio

Legend

- Deciles (England Base)
- 1 10% most deprived
 - 2 11% to 20%
 - 3 21% to 30%
 - 4 31% to 40%
 - 5 41% to 50%
 - 6 51% to 60%
 - 7 61% to 70%
 - 8 71% to 80%
 - 9 81% to 90%
 - 10 91% to 100%

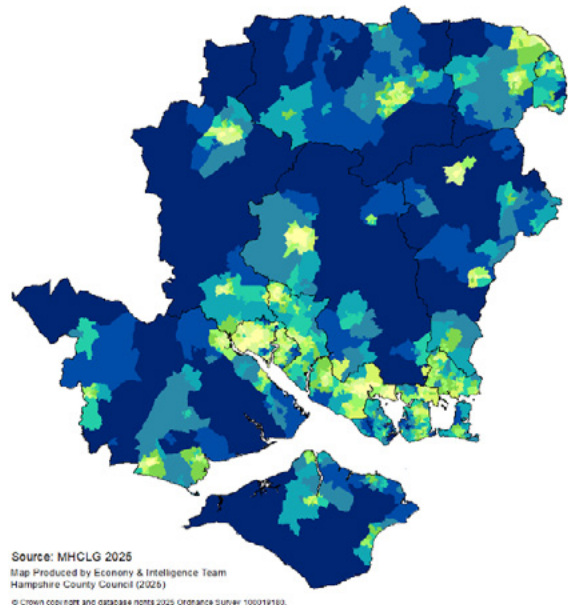
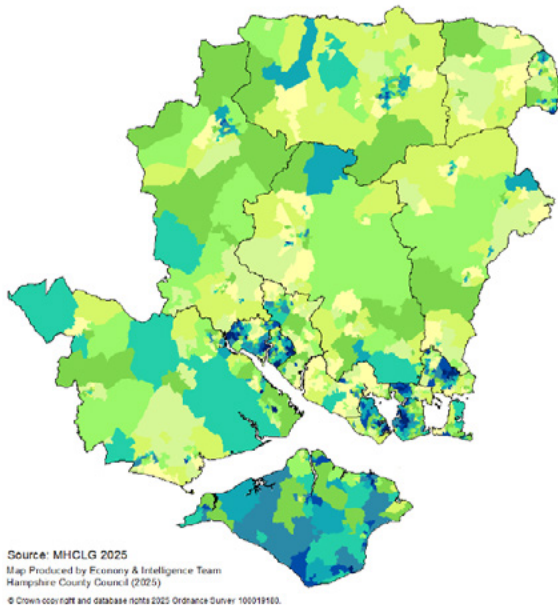
Figure 2: Barriers to Housing & Services



Source: MHCLG 2025

Map Produced by Economy & Intelligence Team
Hampshire County Council (2025)

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These two maps demonstrate the importance of an approach to understanding deprivation in our region which is broad, inclusive and acknowledges both “traditional” and wider, sometimes hidden vulnerabilities.

For example, the scarcity of social housing and the cost of good quality private rented accommodation are ongoing problems for people who are outside towns and cities and experience multiple barriers to living well on a budget.

These include: the higher cost of food in smaller shops, which are often the only local option; housing benefit calculated from costs in nearby cities where private rents are lower, and expensive and unreliable public transportation which can prevent people from taking up employment opportunities.

These layers of inequality mean that people living in more isolated communities have limited choices and may have to seek support from charities to meet basic needs. However, living in an area where anonymity is low often prevents people from seeking help for fear of embarrassment.

What does the usual IMD score overlook?

We held a workshop in November 2025 with colleagues from local authorities across the region to to ask two main questions:

- Who is not represented in the usual IMD score?**
- Who do we know needs more support in our region to live a healthy life, to secure employment, or to live well?**

Above in Figure 1 we outlined the places in our area that present challenges to people living on lower incomes. Figure 2 highlights places where there are barriers to housing and key services.

In our workshop we also noted specific populations who need further consideration:

- Veterans
- Homeless (including sofa surfing, people in temporary accommodation)
- Carers where we have an aging population, and also young carers
- Gypsy, Roma and Traveller communities

Data on these groups are limited in the IMD scores. Yet each include people likely to be experiencing the impact of deprivation in one form or another, including exclusion from training and or the labour market.

Subject to availability of resources and capacity, we propose a further desk-based research project to give policy makers deeper insight into these population groups.

As well as the HMCLG IMD scores, we know of other resources for understanding who is vulnerable, where they live and how unequal and uneven health outcomes and life opportunities are across our region.

For data to support our understanding of and map-out vulnerable populations, we created a shortlist of resources available in small neighbourhoods or wards:

- Hampshire County Council’s mental health index
- DWP data on benefit claimants, updated quarterly
- Data from Citizens Advice on client issues
- Temporary accommodation

Again, subject to availability of resources and capacity, we propose a further desk-based research project to integrate this data into the Joint Strategic Needs Assessment (JSNA) .

This might also include: analysis of public transport access and cost, housing costs compared to the Local Housing Allowance and median incomes. Availability of social housing and referral and uptake of mental health support.



“Making Ends Meet; The Lived Experience of Poverty in the South”

Section 3: Summaries of other pertinent research from University of Southampton colleagues

This section adds breadth and depth to our evidence and understanding of the causes, lived experiences and impact of types of deprivation that are not always routinely recognised as such. Acknowledging hidden deprivation and vulnerabilities will be key to successful design of policy which improves the health and boosts capabilities of residents and communities – a benefit for all.

To summarise some of the findings in this section:

“**Making Ends Meet; The Lived Experience of Poverty in the South**” reveals how the experience of poverty and deprivation when you are surrounded by affluence is different from that experience when you are part of a larger neighbourhood sharing challenges; Professor Helen Carr examines the growing yet somewhat hidden and unacknowledged problem of **rural homelessness**; and a “**rural poverty premium**” is exposed in Professor Smith’s research into the price of the weekly shop in the New Forest; Professor Falkingham’s analysis of an increase in the number of “**pauper funerals**”, people dying with no one to pay for their funeral, except the state, is a marker of an increase in poverty and/or isolation in our region; Dr Tsimpida highlights the experience of **hearing loss and noise pollution for their impact on mental health** and their disproportionate effect on residents in the most deprived areas; and we know from our Clean Air South report on the state of air quality in the region, that **air pollution is worse in the most “deprived areas”**.

STUDY 1

“Making Ends Meet The Lived Experience of Poverty in the South”

Professors Matt Ryan, John Boswell and John Denham

This study explored whether experiences and expectations of poverty are affected by being nested within a wider context of affluence. This is what we call ‘nested deprivation’. It is the deprivation that hides among affluence. What is it like to live under relatively severe economic strain when most people nearby, either in neighbouring towns and suburbs or even those living next-door, are relatively affluent?

The work found pockets of severe multiple deprivation exist right across the South Coast region: in dense urban settings, on the edges of market towns, and in coastal areas experiencing economic stagnation.

Some of the cases examined were examples of neighbourhoods nested within the more affluent South where relatively large numbers of people are suffering deprivation.

Others represent very small numbers of households themselves nested within affluent neighbourhoods.

Researchers compared lived experiences of deprivation in four pairs of neighbourhoods – not deprived with deprived – from Hampshire, Solent and Dorset. Researchers conducted forty-five interviews and six focus groups.





Key Findings

There is a visceral sense of vulnerability among those living in deprivation in the South.

A high proportion of participants opened up about struggles with mental health, histories of violence and abuse, and estrangement from family and other pillars of community life.



Transport

The issue that cropped up earliest and loudest in the field was one of transport. In rural areas, expensive, unreliable and inconvenient bus services were a universal bugbear. In urban areas, the lack of convenient parking for residents was flagged as a significant issue. The availability of affordable and reliable transport is intimately linked to other aspects of life – the capacity to get to work, to get to college, to do the shopping, to stay out of trouble, to get out and meet people and do things.



Housing

Concerns about housing were also front and centre across our sites. Many younger people especially were deeply pessimistic about the prospect of being able to gain independence, let alone own their own homes. As with transport, precarity in housing manifested clear links to economic and personal insecurity.



The loss of the high street and access to affordable and varied shops was a huge issue for our respondents, with both practical and psychological consequences for their quality of life.



Secure employment

Many of our participants had been adversely affected by long-term shifts in the nature of work and employment. They reflected on these declining opportunities in traditional sectors and rising prevalence of casualisation and depressed wages in the nascent sectors such as retail, services and social care.



Communication and engagement

Many communities will be sceptical about efforts to re-engage them in service use because there is a feeling that services are being hollowed out rather than provided for deprived members of a community. Many councils may already be running services of benefit to communities and individuals within them but they are perceived as being ‘not for us’ and channels of communication have been broken.

Improvements in communication will need to be targeted and sustained but could pave the way to greater democratic engagement, particularly if sustained and sensitive attention to these people and their places rebuilds trust.

→ Find out more:

Full article: [Place-based Politics and Nested Deprivation in the U.K. Beyond Cities-towns, ‘Two Englands’ and the ‘Left Behind’](#)

[Thesis - The Impact of Austerity on Political Participation in the UK](#)

STUDY 2

How Safe and How Good is Your Private Rented Home?

It Depends Where You Live In Our Region.

Professor Helen Carr and Dr Mark Jordan –
University of Southampton Law School

Since 2023, research carried out by Professor Helen Carr and Dr Mark Jordan, in collaboration with local authorities, identified stark postcode-based disparities in how local authorities enforce housing standards across the region.

Many private tenants in Southampton and Portsmouth live in unsafe homes. The most recent survey by Southampton City Council in 2008 found that a quarter of private rented dwellings had a category 1 hazard, likely to result in harm that needs medical treatment.

Similarly, Portsmouth City Council inspections from 2018 to 2020 revealed that nearly a third of licensed Houses in Multiple Occupation (HMOs) in the city contained a category 1 hazard such as disrepair, damp and mould, excess cold, electrical faults and fire risks.

Prolonged exposure to poor housing conditions is linked to negative health outcomes and carries particular risks for families with children (30% of all private rented households). Despite the

prevalence of poor conditions in these cities, the local authorities took markedly different approaches to enforcement.

Southampton's approach was largely reactive, complaint driven, and favoured informal action. Portsmouth's approach was more proactive in nature, involving routine fines and prosecutions of criminal landlords.

Professor Carr and Dr Jordan's research examined the legal, institutional and cultural factors that shape local authorities' enforcement approaches and explored how local authorities can grasp the opportunity of the Renters' Rights Act 2025 to overcome barriers to proactive enforcement and drive-up housing standards more consistently across the region.

References to research

Carr, H. and Jordan, M., 2024. Leveraging the potential of local government scrutiny: a case study of Southampton City Council scrutiny inquiry into its private rented sector. *Journal of Social Welfare and Family Law*, 46

Mark Jordan (2025) Overcoming barriers to proactive enforcement in Southampton's private rented sector (People Property Community, 2026)

→ Find out more

Full report: ['How do we get a better deal for private sector renters in Southampton?'](#)

STUDY 3

Professional observation of young people's experience of homelessness

Siobhan Down, CEO and founder of Yellow Brick Road Projects, registered charity

Accurate statistics on the number of young people homeless or in insecure accommodation in our region are hard to establish. Yellow Brick Road Projects (YBRP) is a charity based in Andover, Hampshire that works with young people age 35 and under both regionally, and nationally. Its vision is to empower young people to build a stable foundation for their future.

Here the CEO of YBRP draws on her professional expertise to shed some light on the incidence and impact of reliance on unsuitable or no accommodation on our next generation.

Young people experiencing homelessness or living in temporary or unsuitable accommodation often carry significant trauma and Adverse Childhood Experiences (ACEs), which undermine their stability, emotional regulation, and capacity to engage in support.

YBRP case-management data shows that homelessness is consistently identified as a core vulnerability at the point of nomination. We have programmes specifically designed to reduce risks linked to housing instability, exploitation, anti-social behaviour, and serious violence.

Approximately 75 to 80% of our beneficiaries are experiencing or facing homelessness.

Many of them reside in temporary accommodations such as hostels or B&Bs. These B&Bs are often Travelodge's located out of town, lacking cooking facilities, shops, or laundry services.

Furthermore, the most vulnerable young people are placed in unregulated accommodations with no access to public funds. This situation exacerbates their rent costs and debts, further worsening their mental health, isolation, and risk.

Qualitative observations from supervision and team meetings describe how young people in temporary accommodation often arrive anxious, withdrawn, or less able to engage, with their behaviour frequently making sense only once their living situation is known.

Staff report rising numbers of self-nominations, especially from areas with higher instability such as the Isle of Wight, signalling growing demand from young people seeking support amidst trauma and housing uncertainty.

YBRP's structured model of support alongside weekly mentoring and group sessions, provides the routine, relational safety, and consistent adult connection that trauma-impacted young people need to stabilise and progress. As a result, young people begin to build confidence, strengthen protective relationships, improve emotional literacy, and take steps toward safer, more independent futures despite the barriers created by homelessness and past trauma.



STUDY 4

Homelessness in the countryside: a hidden crisis March 2023

Dr Carin Tunaker, Professor Helen Carr and Dr Laura Burke with Dr Guillermo Reyes-Pascal

This research report, written by researchers from the University of Kent and the University of Southampton, examined the growing yet unacknowledged problem of rural homelessness. It explored the incidence and drivers of rural poverty and homelessness in South Cambridgeshire, Herefordshire, North Yorkshire and Kent.

An important conclusion is that the intersections of disadvantage and vulnerability with rurality intensifies the risk of homelessness and makes homelessness much more difficult to address.

The analysis, conclusions and recommendations reached have significant resonance for Hampshire and the Solent policy makers and stakeholders.

Main Findings

- Rural homelessness is a real and growing problem that requires specific, locally informed and properly funded policy interventions.
- Rural homelessness requires targeted approaches that are different from those in urban areas.
- Without active interventions and good preventive services rural homelessness will keep increasing.
- People with intersecting disadvantages are particularly at risk of homelessness in rural areas. Support services are very dispersed and often unavailable.
- The voices of those experiencing, or who have experienced homelessness in rural areas are rarely heard.
- They told us about the high costs of food and transport and unavailable support services.
- There is a 'rural premium' which is unaffordable for the rural poor and places them at risk of homelessness.
- There is a sharp divide between the housing that is available in rural areas and the housing that is needed. Genuinely affordable housing must be a priority for rural areas.
- An overview of existing research suggests that people in rural areas can be disadvantaged by limited social and economic opportunity, in particular the lack of educational opportunities and the dominance of low paid work, and by constrained welfare provision.
- The shame and stigma associated with homelessness in prosperous areas is a significant barrier to getting support. This intensifies the invisibility of rural homelessness which in turn leads to reduced support services, exacerbating need.



Significant Drivers of Rural Poverty and Homelessness

Affordable and accessible transport. The lack of access to affordable public transport plays a critical role in rural social exclusion, rural poverty and provide a significant barrier to accessing services such as health and education/training and employment.

For example DEFRA's 2019 statistics on accessibility by walking and public transport indicate that:

- The average minimum travel time to a hospital was a little over one hour in rural areas, compared with a little over half an hour in urban areas
- Fewer than half the users living in rural areas have access to places with 5,000 or more jobs within 45 minutes, compared with 91 percent of users in urban areas
- 51 percent of users living in rural areas do not have access to their nearest hospital

Education and Local employment prospects

In rural areas these are often limited. In many instances incomes from rural work are often volatile and irregular. Jobs tend to be concentrated in agriculture, tourism and services, sectors known for lower wages .

Energy costs and rural poverty

Rural households are particularly susceptible to fuel poverty because many of them are not connected to the gas network. This is due to their distance from the network, which forces them to rely on non-mains gas heating fuels that tend to be more expensive.

→ Find out more

Executive Summary: [Homelessness in the Countryside: A Hidden Crisis.](#)



STUDY 5

The cost of the weekly shop is higher for residents in remote rural areas.

Professor Dianna Smith

Corroborating findings on rural poverty in the above report, this research provides detailed evidence which brings the concept of a “rural poverty premium” to life. It priced a comparative shopping basket of goods at 43 shops across the New Forest during June and July 2021. A total of 20 items that were identified by looking at earlier research and discussing commonly purchased items with clients of Citizens Advice.

The results show a huge disparity in prices across the New Forest. The cost of the same basket of goods was lowest at Tesco in New Milton (£16.27) and highest at an independent shop (£49.92). The average cost, excluding farm or community shops, was £28.83. The large Tesco in New Milton is easily accessible by car, however, the nearest bus stop is 10 minutes walk, which will hinder access for people using public transport.

Tesco is an appropriate point of comparison across the New Forest, with 11 stores in a variety of formats. While the assumption may be that costs will be consistent in this company there was wide variation.

Already we noted that the most affordable version of the basket was that from the large Tesco in New Milton, at **£16.27**. The highest cost of the food basket at any format of Tesco was **£38.70** at Tesco Express

in Brockenhurst. The average cost at Tesco Express was **£33.87**, more than twice the cost of the same type of items at the larger store in New Milton.

The Tesco example shows that size of a shop matters. The average price at a supermarket was **£25.73** and at convenience stores it was **£32.88**.

Overwhelmingly, residents in New Milton were exposed experienced the lowest prices while people living in more remote locations would pay much more for the same type of items. This is a clear example of the rural poverty premium.

→ **Find out more**

Full article: [The cost of living in the New Forest](#)

STUDY 6

Numbers of State Funded, “Paupers’ Funerals” Rise as Sign of Poverty in Hampshire and the Solent.

Professor Jane Falkingham

They happen when people die in poverty, alone or without relatives who can afford to cremate or bury them. Funerals paid for out of taxes used to be known as “paupers’ funerals” but are now called “welfare” or “public health funerals”.

The research shows that public health funerals are most common in deprived urban areas and are more likely to involve older male individuals.

In the South East, Portsmouth had the highest rate of public health funerals at almost 29 per 1,000 deaths. Southampton and Brighton and Hove also exhibit comparatively high rates.

All three are urban coastal areas, characterised by lower-than-average earnings, have significant proportions of older housing stock, and health inequality/poor health among residents.

Our analysis discovered the factors that have the biggest impact on public health funeral rates are higher population density, homelessness, overcrowding, and deprivation, particularly the deprivation of older people.

A one unit increase in an area’s level of income deprivation among older people, measured by the Income Deprivation Affecting Older People Index 2019 (IDAOPi 2019), results in 56 more public health funerals per 1,000 deaths, per annum.

Current demographic trends suggest demand for public health funerals is likely to rise. Changes in family structures and ongoing economic pressure mean more people may die without anyone able

to arrange their funeral. This has cost implications for councils and NHS trusts, which need to be recognised in line with existing good practice guidance when local government structures are reviewed.

The findings suggest that targeting resources to areas with higher deprivation to reducing deprivation among older people could lower the need for public health funerals, thus reducing public expenditure.

Local Government reorganisation to unitary authorities provides an opportunity to improve how data on public health funerals is collected and shared.

At present, public health funeral services are patchy and inconsistent. Larger administrative units might offer a more unified service for people who are bereaved. Our research shows that people who receive a public health funeral often do have living relatives, but these relatives cannot afford the funeral and may need financial and emotional support services.

Collaboration and communication with NHS Trusts remains essential to ensure a consistent approach to public health funerals, and this should be integrated into local authority plans across our region.

A recent snapshot survey by the Local Government Association revealed councils arrange an average of 12 funerals a day at an annual cost of about £6m.

“Collaboration and communication with NHS Trusts remains essential”

→ **Find out more**

Full report: [Public health funerals in the South East of England](#)

BBC article: [Are taxpayers funding a cost of dying crisis?](#)

STUDY 7



Hearing Loss – A Major Public Health Problem

Dr Dalia Tsimpida

The consequences of hearing loss extend to health and social care and exert a substantial economic burden. But there is a notable absence of linked data and intelligence for health systems on hearing loss.

This study analysed data from between 2013 and 2022 and focused on approximately 220,000 adults aged 50 plus, who had been identified with hearing loss issues, in nine local authorities within the Cheshire and Merseyside Integrated Care System.

It found an increase in the prevalence of hearing issues over that time; significant inequalities in hearing health not related to age; a strong association between hearing health and socioeconomic

conditions with the strongest association between hearing loss and deprivation.

Recommendations include: Integrating ear and hearing care into national and regional health policies and strategies; incorporate hearing health indicators into the Public Health Outcomes Framework; quantify and monitor local and national hearing loss trends.

→ **Find out more**

Full report: [Integrating hearing care into health strategies. A data driven approach for healthy ageing](#)

STUDY 8

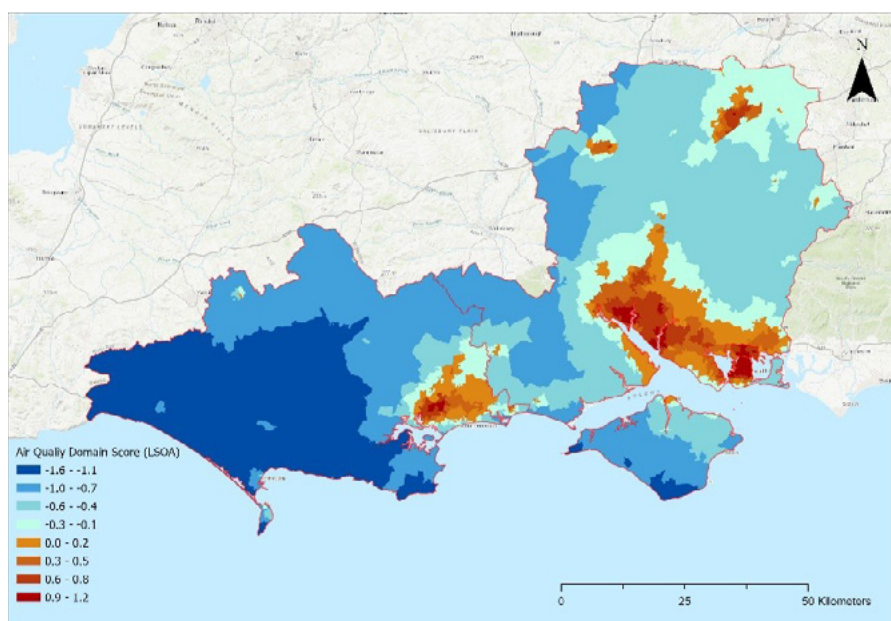
Air Pollution in the South Affects Those Communities Who Contribute Least to the Problem

Research Commissioned by the Clean Air South Consortium

A report from Clean Air South says air pollution in the south of England could be further entrenching health inequalities, with those living in more deprived areas most affected.

Its evidence highlights poor air quality has wide ranging and long-term health impacts, contributes to deprivation, hampers productivity, and puts a strain on local health services. It finds those who contribute least to the problem are also the most exposed to it and the most vulnerable to its damaging effects. This is because socially and economically disadvantaged groups are more likely to live near busy roads, have less access to green space, live in densely populated areas, and are more likely to live in housing with inadequate ventilation and poor indoor air quality. They are also the least likely to own a car or to travel as far for work, education and leisure.

Figure 3 below shows a map of Hampshire, the Solent and Dorset which measures the healthiness of neighbourhoods in Great Britain based on accessibility to various health indicators including air quality, health services and health hazards such as fast food outlets and tobacco shops.



Air quality Domain Score

Figure 3 : LSOA based on the Access to Healthy Assets index & Hazards (2022)

(Source: CDRC)

“Poor air quality has wide ranging and long-term health impacts, contributes to deprivation, hampers productivity, and puts a strain on local health services”



STUDY 9

Noise of Traffic – Impact on Mental Health and Our Most Disadvantaged

Dr Dalia Tsimpida

Transport noise pollution significantly impacts mental health across Hampshire and the Isle of Wight's 1.78 million residents, with Portsmouth experiencing critical exposure levels 38% above WHO guidelines.

This research reveals that noise doesn't just add to mental health problems - it amplifies the impact of social disadvantage. Our evidence-based mapping identifies clear geographic and demographic targets for intervention, enabling cost-effective, place-based strategies that address both environmental stressors and underlying social vulnerabilities

Transportation noise pollution is a significant environmental health risk, linked to sleep disturbance, cardiovascular disease, cognitive effects, and mental health issues.

In Hampshire and the Isle of Wight, key sources include road traffic, shipping, and aviation. While over 30 Air Quality Management Areas (AQMAs) have been established to address air pollution, noise pollution receives less attention.

→ Find out more

Full article: [Road-traffic Noise Pollution and Mental Health](#)

Key Findings

- The research has identified links between noise, the prevalence of depression and socioeconomic factors, and can assist in identifying zones for targeted intervention, the zones where road traffic noise has the highest impact on residential populations (to be designated as Noise Quality Management Areas).
- Portsmouth experiences critical noise exposure requiring immediate intervention.
- Hampshire, Southampton and the Isle of Wight had comparatively lower, but still concerning, average levels.
- In urban areas, income deprivation and health deprivation and disability were strongly associated with higher depression rates, highlighting the significant psychological burden of socioeconomic disadvantage in densely populated areas.
- However, rural areas show different patterns. Income deprivation affecting children was associated with higher depression rates, indicating particular vulnerability in rural child welfare and its impact on residents' mental health.
- Both nighttime and 24-hour noise levels were significant direct predictors of depression in rural areas, showing that prolonged noise exposure throughout day and night affects mental health, especially where noise can be more disruptive in quieter rural settings.
- Noise makes social disadvantage worse for mental health. This research provides the first evidence that in Hampshire and the Isle of Wight, noise pollution amplifies the mental health impact of types of socioeconomic deprivation – an important discovery that shows noise doesn't just add to mental health problems, but it makes other social issues worse.
- Noise pollution and mental health are often treated separately, despite emerging strong evidence of their connection.

PART TWO:

Routes Out of Deprivation

Policy suggestions & how might we improve support for our vulnerable communities



Section 1: Policy Overview and A Different Approach to Policy Making

Two major themes emerge from the research findings and analysis set out so far: transport and housing. They are both the problem and the solution.

We see from the evidence how inadequate, inaccessible and/or unaffordable public transport increases social isolation; creates barriers to accessing employment, training, education and health services and drives rural poverty.

Road vehicles are identified as major causes of air pollution and its associated extensive health issues both physical and mental.

Housing, homelessness and access or not to safe, good quality and affordable accommodation are also both inhibitors or enablers of ensuring people across our region can enjoy good health, feel secure and reach their potential.

How to Make Policies that Work

Robust research is an important tool in policy development. As we have seen in our evidence, understanding lived experience is essential to devising policies that work.

The University of Southampton has considerable expertise in helping policy makers use robust methods of community empowerment and citizen engagement to shape effective interventions.

These methods of so-called deliberative democracy are based on the principle that people can, through good communication, extensive deliberation and the acquisition of research and evidence-gathering skills, come together to make effective decisions about policy areas that affect their lives and communities.

In some cases, members of a community are given research skills to work across the community to produce evidence and gain insight into an issue affecting their peers.

Collaboration, as opposed to conflict, is always prioritised. All those participating in deliberative democracy have equal right to be heard and an equally valid contribution to make. The voices of those usually silent are welcomed and amplified.

One of the conclusions in Part Two of this report is that as well as setting out policy ideas from academics and public officials, it is just as important, if not more, to recognise and consider fresh ways of devising and designing those policies. New approaches to enabling and empowering authentic citizen participation have the potential to shape interventions that work where others have failed.

Examples of how these methodologies and their focus on community empowerment have helped policy makers in the region and are set out in the following three case studies.

CASE STUDY 1

Building Homes and Building Consensus

Building more housing, facilities and amenities is a social and economic priority but often ignites anxiety, division and opposition within existing communities. Are there approaches, which councils might adopt, that foster a supportive environment for positive change, amplify quieter voices and overcome polarisation?

In partnership with Test Valley Borough Council, we trained a cohort of residents in rural areas to become community researchers. Using their newly acquired skills, they gathered village residents' values and views on the past, present and future of where they live.

This community researcher method has been shown to empower communities to create an inclusive environment for change which more easily identifies points of consensus.

The full report, "Beyond Bricks and Mortar" and an accompanying practical toolkit are available.

→ **Find out more**

Full report: [Beyond Bricks and Mortar](#)



Get in touch

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CASE STUDY 2

Young People Shape Their Own Health and Care Services For Hampshire and the Isle of Wight

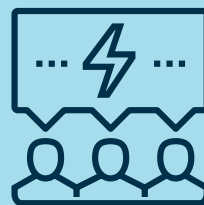
A Young People's Manifesto for Change was agreed and endorsed by health leaders for Hampshire and the Isle of Wight.

The Manifesto, containing twelve evidence-based recommendations to improve young people's health and wellbeing, was produced by a young researchers' Youth Jury, trained and supported by the University of Southampton. Proposals in the Manifesto covered a range of issues that local young people want addressed, including expanding extra-curricular wellness activities; dealing with vaping proactively; encouraging the mixed teaching of Sexual and Reproductive Education and producing youth-led marketing of health programmes.

The members of the Youth Jury went through the NxtGen Researcher Training programme, a programme designed by young people for young people to develop their skills in generating evidence-based policy ideas and the confidence to advocate for change. From this training, fifteen young researchers emerged and became the Youth Jury. Its goal was to increase young people's involvement in influencing health and social care policy and its implementation in the region.

→ **Find out more**

Full report: [Shaping Tomorrow: A youth-led call to action](#)



CASE STUDY 3

Inspiring Residents to Improve Recycling and Reduce Landfill



This project, in Winchester, Eastleigh and Test Valley, focused on inspiring recycling behaviour change amongst residents of communal properties who rely on shared refuse bins. New waste management national standards are being introduced in 2026.

The University of Southampton has developed expertise in community engagement through ‘deliberative dialogue’, involving diverse representation from a target community and securing insights that it would otherwise be difficult to achieve. This project deployed that expertise, bringing together residents, council staff and housing managers to problem solve, improve relationships and understanding and ultimately recycling behaviour.

Pleasingly, councils were able to tell residents and researchers about the changes they had already implemented based on what they had learned from the discussion.

→ **Find out more**

Full report: [Co-designing Improvements in Recycling Practices](#)

This methodology of empowering citizens can be used in different policy areas and with different demographics including intergenerational groups.

The findings of our “Making Ends Meet” research also highlight the importance of not just what policies say but how policy is made and delivered. To quote from the report:

“... While similar issues were raised in different communities, the variation between the experiences, expectations and outlooks between and within those communities means that generic, one-size-fits all policy solutions are unlikely to work.

Such approaches may fail either because the local problems vary significantly or because past attempts to engage with local people have left a legacy of mistrust and scepticism. For this reason,

we suggest public policy in this region needs to have an explicit recognition of and response to deprivation and that public policy must be tailored sensitively to the different contexts and communities in which deprivation is experienced.

We argue for a distinctive set of relevant principles that are sensitive to the regional context, to go along with local adaptation and implementation that can deliver for residents...”

The report also stresses that delivery and follow through are also essential for losing or building trust:

“... Participants commented at times that they had had encouraging encounters or positive communication with official sources – the issue being that over time attention and effort to alleviate their hardships petered out. Community schemes were abandoned. Local schools were closed. Health services were withdrawn. Gaps and flaws in implementation can stall a range of

promising policies and programmes. The effects of austerity at local level, then, are not just in cutting back on vital services. They also plant and fertilise the seeds of distrust and disillusionment among the most vulnerable people in the region. Delivering on old promises and giving attention to follow through, then, can help to demonstrate commitment and regain trust.”

Section 2: Routes Out of Deprivation in Hampshire and the Solent

Evidence-Based Policy Options for the MCCA and Local Authorities

Our research shows that deprivation has many different causes. This creates challenges, but also opportunities: one policy action can produce several benefits. For example, better public transport can reduce social isolation, improve access to jobs and services, and support cleaner air and healthier communities.

High-Impact Policy Areas



1. Empower Communities and Strengthen Citizen Participation

Using proven methods of community engagement and deliberative democracy can help local people shape policies that affect their lives.

Practical action: Train policy makers and council staff in community empowered policy design so they can gather insights, build trust, and develop more effective interventions.



2. Use Public Transport Strategy to Improve Opportunities

Transport is central to people's ability to access education, work, childcare, healthcare and leisure.

Practical action: Use deliberative engagement to understand residents' real travel patterns and needs. Options include bus franchising, free travel for under 21s and transport planning based on daily routines—not just commuter flows.

Connect with transport expertise at UoS and the UKRI Health Benefits from Achieving Net Zero Transport Hub, run from UoS <https://www.ukri.org/news/42m-funding-to-ensure-health-is-central-to-net-zero-strategies/>



3. Transform Housing and Accommodation

Improving the supply and quality of affordable homes can significantly enhance life chances for renters and people at risk of homelessness.

Practical action: Focus on implementing the Renters' Rights Act, including training for officials, tenants and landlords. Strengthen work to monitor rents and understand how poor housing contributes to health inequalities.

More Detail on the Three Areas

Community Empowered Public Services

- The University of Southampton has strong expertise in citizen engagement and deliberative methods. Contact Prof Mary Barker meb@mrc.soton.ac.uk
- These approaches help residents develop skills to contribute to local decision-making.
- Senior academics can use these methodologies to support councils to tackle specific challenges, such as enabling unemployed adults' to design and help shape the most effective employment support.

Transport Strategy

Poor air quality is closely linked to transport. Specific recommendations in this area include:

- Treating air quality as a public health and environmental priority.
- Aligning local authority strategies across boundaries.
- Introducing Clean Air Champions in every NHS trust.
- Considering revenue sources such as a tourist tax or road-use levies.
- Supporting innovative ideas such as water taxis between Portsmouth and Southampton.
- Improving understanding of indoor air quality.



Housing and Accommodation

Key actions for a regional strategy:

- Ensure specialist legal expertise is available to all housing departments.
- Strengthen monitoring of local rent levels.
- Support training on rights and responsibilities under the Renters' Rights Act.
- Use participatory methods to understand tenant priorities.
- Recognise differences between rural and urban housing issues.
- Develop a Rural Poverty and Homelessness Strategy focused on prevention, flexible services and mental health support.
- Review Local Housing Allowances to improve access in rural areas.
- Improve affordable transport links between rural areas and market towns.
- Actively listen to those experiencing homelessness to shape policy.

Other Enablers for Reducing Inequality and Alleviating Deprivation

- Strong working partnerships between the Mayoral CCA and new unitary councils will be vital.
- Recognise how each other's powers can interact to improve people's lives, for eg, although early years services are the responsibility of the unitaries, the CCA can also support improved outcomes through the right transport, skills and job creation plans.
- The next two years offer a chance to build innovative authorities able to make lasting change.

New approaches to consider include:

- Community empowered public services using evidence based methods.
- A Human Systems or People-and-Place Centred model (Total Place) to improve service efficiency and coordination with a focus on community engagement and prevention to address local needs.
- Locating complementary services in community hubs.
- Strengthening high streets and community spaces to reduce isolation.

Finally, the region's four universities could form a Southern Universities Partnership to support the CCA and new unitaries. It would offer a shared academic voice for research and evidence-gathering to regional challenges.

CONCLUSION & FURTHER STEPS

This report has aimed to give a strategic overview and sample of the diverse drivers and manifestations of deprivation across Hampshire and the Solent.

The presentation of a regional overview without a deep dive into local areas is deliberate and was never the purpose of this project.

Further Research Opportunities

However, a more concentrated research-led examination of any of the areas raised in this report could be explored, subject to resources and partners' interest.

In Part One, Section 2 of the report we have highlighted specific populations whose data are not found in the IMD scores. Yet each include people likely to be experiencing the impact of deprivation in one form or another, including exclusion from training and/or the labour market.

Subject to availability of resources and capacity, we propose a further desk-based research project to give policy makers deeper insight into these population groups.

For data to support our understanding of and map-out other vulnerable populations, we created a shortlist of resources available in small neighbourhoods or wards:

- Hampshire County Council's mental health index
- DWP data on benefit claimants, updated quarterly
- Data from Citizens Advice on client issues
- Temporary accommodation

Again, subject to availability of resources and capacity, we propose a further desk-based research project to integrate this data into the Joint Strategic Needs Assessment (JSNA).

This might also include analysis of public transport access and cost, housing costs compared to the Local Housing Allowance and **median** incomes. Availability of social housing and referral and uptake of mental health support.

Evidence-Based Policy

In general, we want our evidence to be useful and we have presented some ideas for policy interventions and new ways of designing policy. We hope these are helpful. However, these are not intended to be recommendations - rather suggestions for partner policy experts to consider and discuss.

Impact of Devolution and Local Government Review

Devolution for Hampshire and the Solent carries risks and opportunities for the delivery of policies to alleviate poverty and deprivation.

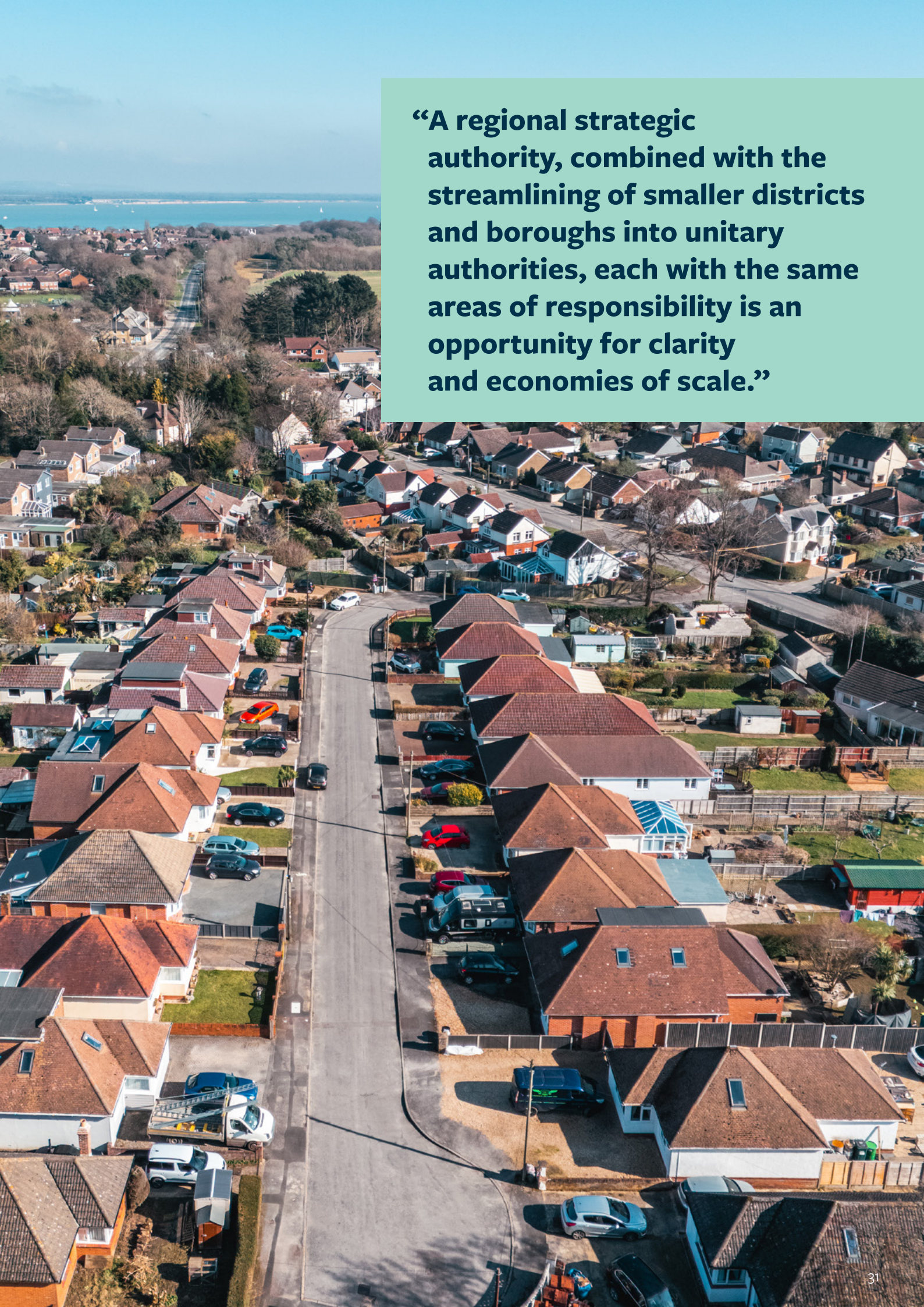
As we have seen, in some areas of intervention, such as the enforcement of laws to protect tenants in private rented accommodation, an overarching strategic approach to adopting best practice is an opportunity, and one that reduces the risk of residents enduring post code lotteries.

A regional strategic authority, combined with the streamlining of smaller districts and boroughs into unitary authorities, each with the same areas of responsibility is an opportunity for clarity and economies of scale.

A risk in both types of reform is that services and service providers become remote from the people they aim to support and local knowledge and familiarity with communities is lost.

Political leaders and policy makers are likely to be considering ways to mitigate these risks.



An aerial photograph of a residential neighborhood. The houses are mostly two-story with brown roofs. A road runs through the center of the neighborhood. In the background, there is a large body of water under a clear blue sky. A green text box is overlaid on the right side of the image.

“A regional strategic authority, combined with the streamlining of smaller districts and boroughs into unitary authorities, each with the same areas of responsibility is an opportunity for clarity and economies of scale.”

