

# Deep and persistent exclusion: interrogating the idea of the 'bottom 2.5 percent'

## *Thoughts in progress*

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*Background paper for seminar - 24<sup>th</sup> June 2008*

Part of the Young Foundation programme *Mapping emerging and unmet needs*

### **Background**

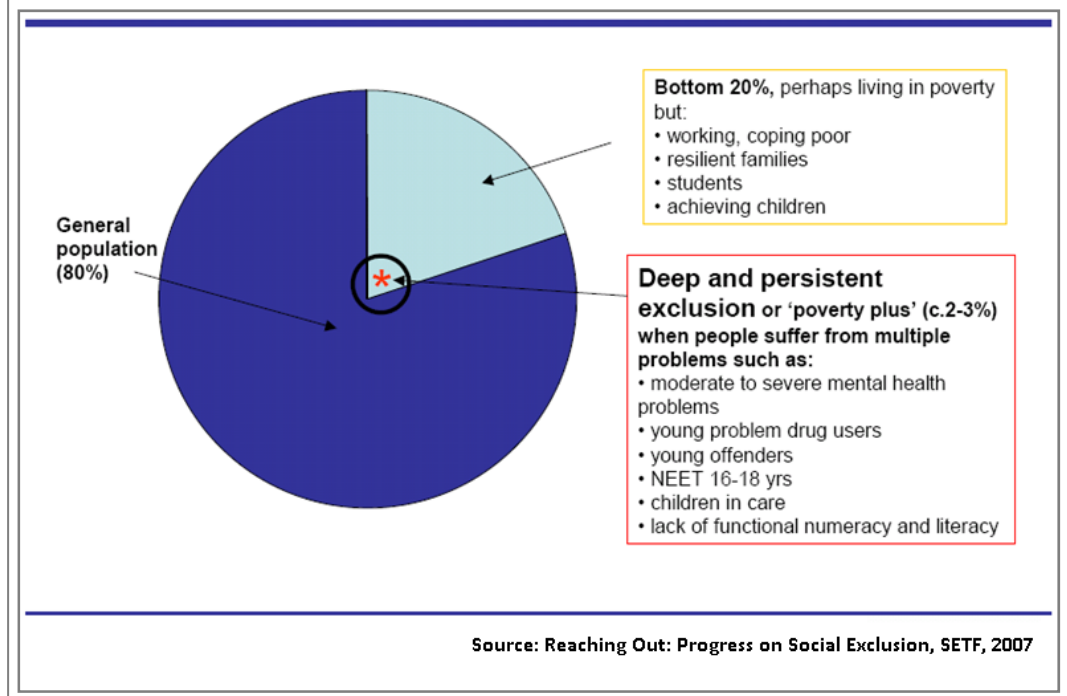
The Young Foundation's Mapping Needs programme brings together a coalition of more than a dozen independent foundations and funding bodies to develop new insights into how social needs in Britain can be prioritised and met. The two-year project aims to provide an independent overview of changing needs, providing a complement to current research and helping to guide the policies and actions of foundations, government and civil society. The project aims to capture perceptions of need from four perspectives: from the viewpoint of people in their everyday lives; frontline workers; local service providers; and experts in government, foundations, academia and elsewhere. Multiple methods and data sources will be employed to map needs across these four viewpoints, including secondary analysis of existing data, new quantitative and qualitative research, participatory research and 'knowledge mining' of key intermediaries from the police, to care-workers and taxi drivers. This seminar is the first in a series of events seeking to contribute to the programme.

### **Objectives and a starting point**

One of the core aims of the Mapping Needs programme is to identify which individuals and/or groups experience multiple, entrenched and hidden needs – the so called 'bottom 2.5%'.

The idea of 'the bottom 2.5%' was used by the Social Exclusion Task Force (SETF) to describe people who are deeply and persistently excluded, who are at the bottom of the income scale and who "face multiple intractable problems" (CO/SETF, 2007: 5) (see figure 1). This is one way of conceptualising the issue under examination here.

*Figure 1: Deep and persistent exclusion*



Other concepts including *poverty, social exclusion, marginalisation, vulnerability, deprivation, class, underclass* and *inequality* have offered other lenses through which to consider this set of issues. Also relevant are methodological attempts to engage and understand *hard to reach groups, hidden populations* and *subpopulations*.

This paper takes the concept of 'the bottom 2.5%' as a starting point from which to consider afresh the best ways of speaking about, conceptualising, researching and ultimately addressing this set of social problems. The term 'bottom 2.5%' is referred to as a *concept* since it is based on a series of hypotheses about groups who are deeply excluded and an estimate of how many people are in that group. We are not therefore claiming to focus on exactly 2.5% of the population. Rather, we hope to explore how we might define and conceptualise this group (however large or small it may be), and use this to inform, and in an iterative engagement with, our empirical research.

This paper hopes to utilise the insights of previous and continuing work, but also to extend existing approaches and question the assumptions implicit within them. It lays out some challenges, poses some questions and shares our thoughts as they have so far progressed. It does not provide definitive answers, but aims to stimulate a conversation that will inform the Mapping Needs programme, and contribute towards developing new insights into hidden and unmet social needs in Britain.

This discussion is organised under the following headings and questions:

- Why are these people important to us?
- Who are 'the bottom 2.5%'?
- The problem with thinking in categories
- Conceptualising 'the bottom 2.5%'

- Resources, barriers to resources and 'the bottom 2.5%'
- A model: do take-up curves help us understand the problem?
- Movement into & out of 'the bottom 2.5%': what do we know about dynamics?
- 'The bottom 2.5%' and research methods
- Terminology

## Why are these people important to us?

There is a huge premium in current public policy in tackling deep exclusion and marginalisation. This is partly in recognition of previous failures, partly as a way of improving the reach and effectiveness of public services and partly in order to achieve more traction on the problem of growing inequalities in income, health, education and wellbeing. Some think that the health of modern society might reasonably be measured by the state of its most marginalised, vulnerable, downtrodden and disempowered.

Two intriguing and recurrent dilemmas that policy makers have faced, bring the importance of 'the bottom 2.5%' further into focus: how can you measure that which might be invisible, and why do public programmes designed explicitly to lift up those in deep poverty or with other significant social problems always fail to penetrate 100% of their target? Of course many programmes underperform by a much greater margin, but the point remains that something is going on which requires better data and better analysis.

One can imagine many domains in which there might be a bottom or last section which misses out. It is unlikely that an individual will be in that section for every domain, whether it be health, income, psychological wellbeing, social networks, consumer and legal need or access to education and culture. But our suspicion is that there may be some significant co-incidence at play which merits further investigation. Understanding some of the processes of exclusion and self-exclusion will help inform better decisions.

## Who are 'the bottom 2.5%'?

This paper aims to reconsider how we can conceptualise 'the bottom 2.5%'. Before reconsidering, it is worth reviewing which individuals and/or groups we might intuitively want to include in this group. Figure one above suggests that this group "suffer from multiple problems". It highlights the following groups of people: those who suffer from moderate to severe mental health problems; young problem drug users; young offenders; 16-18 year olds who are not in employment, education or training; children in care and people who lack functional numeracy or literacy (CO/SETF, 2007: 5).

In these examples, the SETF have focused strongly on young people, but there is nothing in the account of 'the bottom 2.5%' that necessitates this focus. Taking their account as a starting point, the following groups might be added to the list:

- **Offenders and ex-offenders:** at the end of 2007 the probation service was supervising more than 240, 000 people across England and Wales (MOJ, 2007). A further 84, 000 people are in prison according to the most recent statistics from the prison service (NOMS, 2008).
- **Functional literacy:** 1.1 million 16-65 year olds are functionally illiterate (DfES, 2003).
- **Exclusion and 'missing children':** It is estimated that in excess of 9,000 pupils are permanently excluded from school each year. Estimates also suggest that up to 10,000 pupils are missing from school completely (Ofsted, 2004).
- **Undocumented migrants:** the Home Office estimates that the unauthorised (not necessarily the same as 'undocumented') migrant population in 2001 lay between 430,000 and 570,000 (Home Office 2005:5). Data on this however, is particularly problematic.
- **Sex workers:** In 1998 it was estimated that 1420 people per year were brought into the UK to as sex workers (Kelly and Regan, 2000). Unpublished research suggests that up to 4,000 people in Britain are victims of sex trafficking (Coaker, 2006).
- **Travelling communities:** There are no official figures on the size of the Traveller and Gypsy population in Britain, but it is estimated to be around 300,000. Opportunities for Travellers and Gypsies to pitch their homes in authorised areas are declining: government figures show there has been an overall loss of 596 authorised pitches over the last seven years (Crawley, 2004).
- **Mental health:** 8.25 million have moderate mental health problems (i.e. those on level 2 on the EuroQol dimension of anxiety/depression) and 770,000 have severe problems (those on level 3). The overall figure for the number of residents in institutions for people with mental illness is just under 100, 000 (SCMH, 2003).
- **Homelessness:** figures about how many people are homeless are hotly disputed. In terms of rough sleeping, estimates suggest there are nearly 500 people sleeping on the streets in England, but data on rough sleeping is notoriously hard to collect. Government research has acknowledged that at least 10 times that number sleep rough over the course of a year (Shelter, 2007). In terms of homelessness more generally<sup>1</sup>, in 2006/7 115,430 people were found to be homeless by local authorities in England (although only 73,360 of these were found eligible for rehousing) (Shelter, 2007: 5). These figures only include those people who have approached their local authority for assistance: some estimates put the total number of homeless people at around 400, 000 (Crisis, 2008), which includes over 100 000 homeless families in temporary accommodation (Palmer, McInnes and Kenway, 2007: 117).
- **Drugs and alcohol:** estimates of the levels of drug and alcohol addiction vary. There are 150 000 users of drug rehabilitation services in England and Scotland (DOH:2003) . Research suggests that between 22 and 44% of adult psychiatric inpatients also have problematic drug or alcohol use, up to half being drug

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<sup>1</sup> Including people who are temporarily staying with friends or family; staying in a hostel or bed and breakfast; living in very overcrowded conditions; at risk of violence or abuse in your home; living in poor conditions that affect your health and living somewhere that you have no legal right to stay in (eg a squat) (Shelter, 2007).

dependent. It has been suggested that fewer than 20% of psychiatric inpatients receive treatment for their substance use (DOH: 2006).

- **Informal economy:** National estimates for the size of the informal economy in the UK range between 7 and 13 per cent of gross domestic product (ODPM/SEU, 2004). Economic exploitation and other inequalities are known to be prevalent, although there are also many people within the informal economy who prosper, at least financially.

This list is not exhaustive and only aims to suggest some of the groups that are of relevance to this discussion. Other groups might include: those who are long-term unemployed; children in care; dementia and alzheimers sufferers; children who have run-away from home; and victims of domestic violence. The list goes on.

## The problem with thinking in categories

Social researchers (particularly those in third sector organisations) often rely on these kinds of categories as tools with which to include the voices of *hard to reach* or *seldom heard groups* (for example, see The Prince's Trust, 2004 and Watts et al., 2008).

Intermediary organisations who work with the target group can direct researchers to participants and through this process (so the argument goes) the most marginalised voices in society can be included in research and consultation exercises.

As a pragmatic research tool this approach is defensible (it's limitations are discussed in more detail later), but in reconsidering how to conceptualise 'the bottom 2.5%', thinking in terms of categories brings several problems to the fore. Firstly, the very different categories included in the list above highlight the massive diversity of experience likely to be found within 'the bottom 2.5%'. This diversity can be disguised by statistics, which while crucially important, may be inaccurate, are invariably contested and shed little light on the *severity* of need within groups or on movement into and out of groups. What if anything, do all of these subgroups have in common that warrants speaking about them in aggregate? Can we generalise at all about the experiences or needs of this 'the bottom 2.5%'? Furthermore, by focusing on these categories and groups, who do we miss out? Who falls through the gaps *between* these groups and categories?

Secondly, by identifying a series of sub-groups within 'the bottom 2.5%', is there a risk of over-emphasising the commonality of experiences and needs of those who fall within the same sub-categories? To what extent can we generalise about the experiences and needs of people who work in the informal economy, or of people who are homeless? The reasons why they are in this group may differ enormously, as might their need for services and support.

Furthermore, there may be individuals who fall into one of these categories who are 'positive deviants'. One response to this might be to question whether positive deviance within some of the groups identified is possible: can someone who is addicted to a class A drug or who has been trafficked into the UK illegally *not* have serious and unmet needs? This highlights the importance of the distinction between

*felt* or *subjective need* and *objectively* or *expertly* defined need: someone with an addiction may not see themselves as an addict, with the associated needs that addiction implies.

Thirdly, by speaking in terms of discrete groups and categories, the overlaps and connections between these groups might remain hidden. For example (and as work by the SETF recognises) does 'the bottom 2.5%' primarily refer to groups and individuals who simultaneously experience multiple problems? Rather than reflecting a concern with the situation and needs of ex-offenders for example, does the concept of the 'bottom 2.5%' point instead to concern for unemployed ex-offenders who have had experiences of homelessness and who have mental health problems? Centrepunt have highlighted the important connections between being young, black, gay and at risk of homelessness (Centrepunt, 2006a). Are these the kind of groups that a focus on 'the bottom 2.5%' should direct us to?

There is a tension to be reconciled then, between *severity* of need and *multiplicity* of need. Recognising the importance of multiple and overlapping needs highlights further conceptual (and methodological) challenges. How can we identify which individuals and groups might be considered in 'the bottom 2.5%', if this will include all those people with multiple needs across a long list of (infinite?) domains?

These issues highlight the problems of thinking about 'the bottom 2.5%' in terms of a series of categories or sub-groups. Recognising these limitations prompts the following question: how can we talk about, identify and characterise the individuals and/or groups of people we are referring to without falling back on existing categories? Considering 'the bottom 2.5%' from a conceptual, rather than an empirical perspective may help untie some of these knots.

## Conceptualising 'the bottom 2.5%'

Conceptualising 'the bottom 2.5%' is problematic. The phrase itself suggests a vertical conceptualisation, according to which this group are distinguished from the rest of the population in a vertical hierarchy. This vertical hierarchy could take a number of forms (a class hierarchy, for example). Alternatively it could refer to a hierarchy of wealth and income. In identifying 'the bottom 2.5' as a "poverty plus" issue (CO/SETF, 2007: 5), the SETF seem to favor this kind of interpretation. This interpretation also complements the intuition that low income will be strongly associated with facing multiple, hidden and entrenched needs.

Alternatively, a *spatial* conceptualisation might be employed. Discourses around *social exclusion* offer such a conceptualisation by positing a distinction between *inclusion and exclusion* rather than *top and bottom*. It is worth noting that the concept of 'social exclusion' is widely contested and used in a variety of ways. The way in which it is being employed here might be most closely tied to its use in France in the 1970s and early 1980s when it referred specifically to "a range of marginalised groups who had fallen through the net of the French social insurance system" (Lister, 2004: 75). In this context we might wish to broaden the notion to include marginalised groups who have fallen through the net of a series of systems (rooted in



statutory provision, civil society, the family and private sector) that contribute to meeting people's needs.

This spatial conceptualisation offers an account of disadvantage independent of income and wealth, allowing for the possibility that serious unmet need can be experienced by people in the higher proportions of the vertical hierarchy described above (for example, dementia, mental health problems and domestic violence are experienced across the income distribution). In the context of the Mapping Needs programme, which aims to map social needs across the board, this is a useful perspective, allowing more manoeuvre than a conceptualisation of 'the bottom 2.5%' which is wholly tied to material deprivation. It allows for the possibility that even wealthier individuals may face significant barriers to accessing services and may slide into this category because of particular trigger factors in their lives – for example suffering severe depression may lead to loss of a job and have the knock on effect like home repossession etc .

### Resources, barriers to resources and 'the bottom 2.5%'

The conceptualisation offered above directs attention *both* to the importance of income and wealth in meeting needs *and* to the importance of other 'resources' (and barriers to accessing those resources) in meeting needs. These resources might include:

- **Communication skills/accessible service structure:** being able to negotiate service delivery systems and articulate how one's circumstances map onto to statutory or organisational categories will be important in meeting one's needs. This will depend as much on the individual's capabilities as on the structure of the service on offer.
- **Proximity/ease of access:** geographic proximity to a service provider is an important resource, both in terms of the actual distance to a service and an individual's ability to reach the service, however far away it is. Urban/rural distinctions will be important here, as will lack of access to flexible, frequent and affordable transport, which may not be an exclusively rural problem.
- **Access to accurate information:** accurate information about where and how to access a service is a crucial resource. Lack of information may leave important needs unmet. The so called 'digital divide' might be an important phenomenon here, with organisations increasingly using the internet to disseminate information.
- **Eligibility:** eligibility for a service is a crucial state or organisationally defined resource that individuals may require to meet their needs. Undocumented migrants are one group that are likely to be ineligible across the spectrum of *publicly* provided services, as will *documented* migrants who do not have access to public funds. Social care for older and disabled people is an area in which strict eligibility criteria determine the level of assistance a person will receive. The Commission for Social Care Inspection has warned that eligibility rules and limited resources have contributed to shortfalls in the provision of care services, in particular among individuals with moderate or low care needs (CSCI, 2008:

109). British homelessness legislation provides another example: in the last quarter of 2007, only 49% of people who presented to a local authority as homeless were accepted as eligible for full local authority assistance (CLG, 2007).

The importance of eligibility as a 'resource' points to a distinction between people who may be in 'the bottom 2.5%' because of their position within statutory or organisational categories and those who are absent from these categorisations and structures. The following example illustrates this distinction: children who are excluded from school are defined relative to a statutory process of exclusion from school. Another group of school age children (about which much less is known) have not been excluded from school but are nevertheless absent from the schooling system. These so called 'missing children' have either never enrolled at school or simply stopped turning up (Ofsted, 2004). Their 'exclusion' is therefore independent of statutory categories.

Barriers to accessing the resources required to meet needs might include:

- **Language and/or cultural barriers:** services that provide information in only one language will necessarily exclude groups who are not familiar with that language. Cultural barriers to accessing a service may be equally important: for example, recent research from the NSPCC highlighted the impact of cultural factors on Asian victims of domestic violence receiving help and support (NSPCC, 2008).
- **Discrimination:** discrimination towards particular individuals and groups from service providers may also prove a major barrier to accessing services.
- **Lack of trust in organisations:** including fear or expectation of discrimination. People or groups who have been subject to penal or disciplinary interventions might face significant barriers in approaching services or in trusting organisations to provide appropriate support. Similarly, individuals who have been found ineligible for a particular service in the past or who have had negative experiences attempting to access a service, may be reluctant to engage with other services in the future. A report by the Prince's Trust found that 24% of the disadvantaged young people involved in the research would never go to a specialist organisation for help or advice. Reasons given for this included a lack of understanding of the services available, a lack of trust in these organisations and reluctance to raise personal issues with them (Prince's Trust, 2004).
- **Stigma:** the perceived stigma attached to claiming a service or approaching an organisation may prevent an individual accessing it.

Where a number of these resources are absent and/or barriers present, this may indicate that an individual or group are deeply and persistently excluded or in 'the bottom 2.5%'. Mapping the barriers/resources individuals have to overcome/use to meet their own needs is another way of identify people who fall into this group without relying on vertically defined categories.

This discussion indicates how dimensions such as age, ethnicity, gender and geography might effect how easily an individual or group of people can access these resources and how acute the barriers they face may be. In some cases however,



whilst we know that a particular group is at more risk of experiencing an unmet need than other groups, the mechanisms for this may not be sufficiently understood. For example, in 2005 the Office of the Deputy Prime Minister noted that “too little is known about why black and minority ethnic young people are three times more likely to be homeless as their white counterparts” (Centrepoint, 2006b).

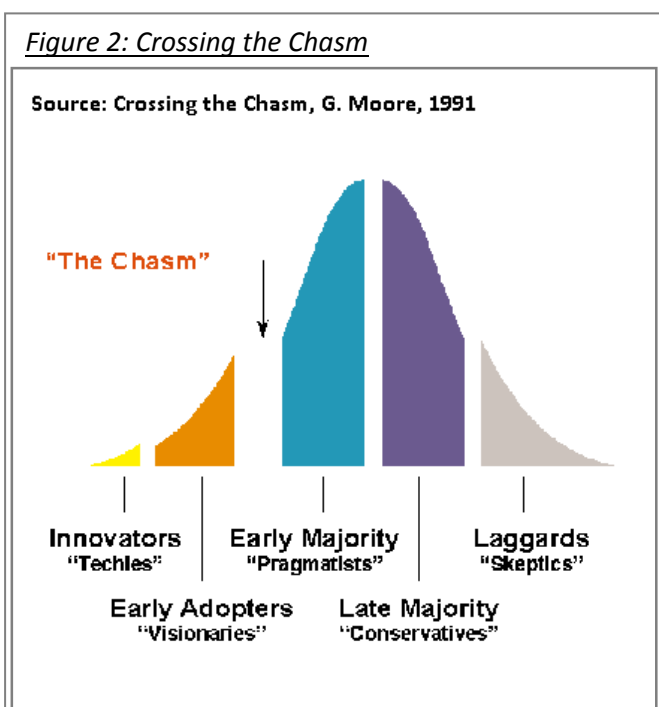
A further theme running through this discussion has been the tension between (i) the characteristics of a service or service provider, and (ii) the characteristics of an individual who might access that service, in determining whether a need remains unmet. The quality of this interaction will determine a person’s experiences. For example, if a homeless person is ineligible for local authority assistance, this will be sufficient to exclude them from that service (except where local authorities are able, and wish to use their discretion), but eligibility is not *sufficient* to ensure that a homeless person accesses local authority support. How that service is delivered and that individual’s perception of the service will play a central role. If that individual lacks trust in their local authority or fears discrimination, this may be sufficient to prevent them even attempting to access that service.

### A model: do take-up curves help us understand the problem?

One way of organising and orienting these issues is provided by theories which originated in business. Goods, whether they be social goods or other, tend to permeate rather slowly into the last sixth of any market. This happens also to be true about government and civil society attempts to roll out benefits, credits and other social goods where there is recognised to be a permanent problem with that stubborn last decile or two of people who would really benefit. Can we learn from the problems that businesses have had in the long tail of each market, in understanding the motivation, attitudes and behaviour of those individuals whom classic economic

theory fails to account for, who do not optimise their utility with each decision they make. In fact research into consumer behaviour indicates that often decisions are made which actually disadvantage the individual in a strict pecuniary sense. Something else is going on in the process of choice for that individual.

So let us examine briefly theories about how market innovations diffuse through a population, clustered according to the sequence in which they adopt a new product (Rogers, 1962). Figure two illustrates the



theory: innovators and early adopters are the first groups to try out a new technology or good. The early and late majority are the bulk of the market: they represent the key challenge for companies who (according to Moore's elaboration of the theory) must *bridge the chasm* between the early adopters and this group in order to ensure a profitable outcome (Moore, 1991).

The remaining 'laggards' are inconsequential to the private sector, with the marginal effort it takes to get these individuals to adopt the product outweighing the profit that penetrating this part of the market would bring. Flipping this model around, we can think of the so called 'laggards' as the crucial group for the public and third sectors seeking to tackle unmet need. These are the individuals who are not reaping the benefits of the support and services (provided by the state, family, civil society or private sector) available to meet their needs. Instead of the chasm existing between the early adopters and the majority, the chasm is between the majority, and the 'laggards' who lack resources and face barriers in accessing the support and services available to them.

The model offers an alternative lens with which to consider 'the bottom 2.5%' (or the 'laggards' in this model). It suggests that thinking about 'the bottom 2.5%' may be easier and more useful in individual domains of service provision, rather than across the spectrum of social need.

The model also offers a set of tools with which to consider why some individuals 'lag behind' in the provision of particular goods. In order to adopt a new technology or an available service, people must first be *aware* of that product or service as discussed above, but moving from a state of awareness to adoption will depend upon the characteristics of both the product/service and the individual. The model offers a series of concepts with which to think more systematically about the factors relevant here:

- **relative advantage:** the product/service must be perceived as better than the state of affairs it supersedes;
- **compatibility:** the product/service must be perceived to be consistent with the existing values, past experiences and needs of potential adopters;
- **complexity:** the more difficult to attain and use the product/service is, the less likely it is to be adopted;
- **trialability:** opportunity to experiment with a product/service on a limited basis can help facilitate adoption;
- **observability:** experiencing visible results and benefits from the product/service is conducive to an individual adopting it.

These five concepts, which are significantly evidenced in research into consumer behaviour and in relation to the take-up of state services, can quite neatly be mapped onto the characteristics required by state (or civil society) delivered social goods which are optional and dependent on take-up. The uptake of means tested benefits and credits (such as Pension Credit) follow a similar curve, with the state struggling to penetrate the last three deciles of the 'market'.

One limit of this model is that it applies only to needs which have been identified and responded to, i.e. where there is a service or product that is trying to penetrate the 'market'. The model also fails to include an account of individuals or groups who are *ineligible* for the service in question, mainly because *ineligibility* is a concept that does not apply in the private sector, where *ability to pay* is the central variable. In terms of the diagram presented in figure two, ineligible individuals and groups might be represented as a free-floating bubble hovering above the tail of the graph and locked out of the 'market' in question.

In spite of these limits, the model offers useful tools for those trying to ensure that new or existing services penetrate a 'market' as deeply as possible and for those trying to understand why some individuals and groups may be 'in the tail' for a given service? Can this inverted model of 'crossing the chasm' in the diffusion of services be applied across other domains, like education, health and mental health care, tax credits, using a bank account, having functional literacy and numeracy? How can the model help understand those individuals or groups who are 'in the tail' across a series of domains?

The following section uses data and research on the non-take up Job Seekers Allowance to illustrate the relevance of the model in one particular domain.

### **A worked example: take-up of Job Seekers Allowance**

The Department for Work and Pensions (DWP) estimates that take-up of Job Seekers Allowance (JSA) in 2005/6 was between 50 and 59% by caseload<sup>1</sup>, 13% lower than in 1997/8. This leaves a sizable 'tail' of eligible individuals who do not benefit from the provision of this benefit. Further analysis suggests that take-up is lowest among single females, people who had only recently become unemployed and people who are eligible for smaller amounts (DWP, 2007). In agreement with the Prince's Trust research cited earlier, the DWP analysis also found that younger people were less likely to take-up JSA when they were entitled to it.

These findings prompt further questions about *why* people with these characteristics are less likely to take-up JSA than others. Given that take-up of JSA is lower than for other benefits, and declining over the long-term, what impact does the sanctioning process (and other conditions for the receipt of a benefit) have on levels of take-up? What other factors to do with the architecture of social policies are important here?

An assumption implicit in this discussion so far, is that non-take up of a particular benefit/ service implies an unmet need, but it is possible that non-take up may correspond to an *absence* of need. The relative advantage to an individual of using that service may be minimal or non-existent. But the DWP analysis cited above found that two thirds of eligible non-recipients of JSA lived in low income households (DWP, 2007), which is at least indicative of an unmet need. Furthermore, research into severe child poverty published by Save the Children found that children in families receiving benefits face a lower risk of severe poverty than children in families who are *not* receiving benefits. The authors hypothesise that given the very low income of families with children in severe poverty we can expect at least some of them to be *eligible* for means-tested benefits. They further hypothesise that because

being in a family with children in severe poverty is associated with particularly low educational attainment, a lack of knowledge of benefit entitlement or a lack of skills to make successful applications might be the reason for non-take up (Magadi and Middleton, 2007).

If, as this evidence suggests, non-take up *does* correspond to unmet need, the imperative to gain a better understanding of reasons for non-take up is renewed. This imperative might be deemed particularly strong where an individual does not receive *multiple* services or benefits for which they are eligible? Beyond the sphere of benefit take-up (where data on non-take up is particularly strong) how can we discover who does not engage with a service and why?

## Movement into and out of 'the bottom 2.5%': what do we know about dynamics?

So far, this discussion about 'the bottom 2.5%' has not tackled the question of movement into and out of this group. Social research increasingly reflects a concern about the dynamics of social phenomenon: see for example, *The housing pathways of new immigrants* (Robinson et al., 2007) and *Poverty dynamics research in the UK* (Smith and Middleton, 2007). How does this focus on dynamics and pathways factor in to the issue of 'the bottom 2.5%'?

At the beginning of this paper two phrases were used to characterise 'the bottom 2.5%': *deep and persistent exclusion* and *multiple, hidden and entrenched needs*. If *persistent* exclusion and *entrenched* needs are part of a definition of what 'the bottom 2.5%' means, then the issues of dynamics and mobility into and out of this group has been 'defined out' or at least, levels of mobility will be minimal.

However, persistence and entrenchment are better thought of as hypotheses about 'the bottom 2.5%' rather than defining characteristics. Evidence to support the hypothesis includes JRF funded research on the dynamics of poverty, which cites evidence from the British Household Panel Survey that between 1991 and 1997, 2% of the survey sample remained in poverty for all seven years, whilst for many other households poverty is experienced only transiently (Smith and Middleton, 2007).

Another hypothesis might be that people and groups of people with multiple needs, may experience reinforcement mechanisms in which one need reinforces another or prevents another from being met. For example, someone who is functionally illiterate and earns a low income may experience these two needs as mutually reinforcing: their low income may mean they have to work long hours to scrape by and their limited literacy may block them out of better paid employment. In their work on 'horizontal inequalities', Stewart and Langer (2007) show how low levels of human capital, social capital and financial capital can reinforce each other. They cite the example of racial inequalities in the United States. explaining how affirmative action seeking to increase levels of *human capital* among the black population (mainly through education) has not been sufficient to address these inequalities due to their persistently low levels of financial and social capital.

However low levels of mobility into and out of 'the bottom 2.5%' are, there will be some movement, and understanding the risk factors, tipping points and triggers that cause people to move into a position of deep exclusion (and those factors which precipitate moving *out* of this category) will be central to finding policy mechanisms and other responses that help move people away from a position of serious need. However, gaining this understanding may be particularly problematic for the group in question, as their multiple needs will interact, reinforce and influence each other in ways that make identifying key risk factors difficult.

## 'The bottom 2.5%' and research methods

One remaining question concerns how the discussion so far can inform the methodology employed in the Mapping Needs programme and in other research seeking to engage with 'the bottom 2.5%'. Concern to reach, consult or otherwise engage with the so called 'hard to reach' has become ubiquitous in the public and third sectors, as well as among researchers who retain a concern to reach *hidden populations* and statisticians who have an enduring interest in *subpopulations*.

Researchers across a series of disciplines have developed techniques to reach groups like injecting drug users, people who are homeless or people involved in prostitution, who may be inaccessible using mainstream research techniques. These include:

- **Snowball sampling**, in which a set of initial study participants refer the researcher on to other eligible respondents, who once again provide further references for more potential respondents.
- **Time-space sampling** involves determining when and where hidden populations congregate and visiting these sites to collect data.
- **Respondent-driven sampling** which incorporates some methods of snowball sampling, such as chain referral sampling, but includes additional provisions to minimise bias.
- **Non respondent surveying** involves analysing the characteristics of individuals who do not respond to a particular survey or research exercise. This is often used in quantitative research exercises, where basic demographic information about non-participants is available.

As discussed earlier, third sector organisations often rely on simpler mechanisms to reach those who are 'seldom heard', by specifying one or a series of groups (like those listed at the beginning of this paper) and including them in the research exercise by contacting intermediary organisations who work with the target group. For example, researchers seeking to represent the views of ex-offenders might make contact with *Nacro*, a charity that works with ex-offenders.

All of these methods have limitations. Snowball sampling will select those individuals who are bound together by a social network and will thus depend on the contacts of the initial sample (the 'seeds'), but what about hidden populations where social networks are fragmented (like undocumented migrants from different native

countries) or non-existent (like undiagnosed dementia sufferers)? *This* hidden population is thought to be particularly large in light of estimates that only a third to a half of dementia sufferers ever receives a formal diagnosis (National Audit Office, 2007: 7).

Furthermore, where people experiencing a social need have no social connection, collective articulation of that need and demands for a public response are unlikely. In this situation, the social need is likely to remain unmet. Where a particular group is dynamic – i.e. people frequently move into and out of the group – collective articulation of needs and a public response are also unlikely. So which other kinds of needs are experienced by people who are isolated from each other or by people who move into and out of that position of need dynamically? Respondent driven sampling (a refined version of snowball sampling) only promises to meet some of these objections.

Using organisations to access groups who are considered to be ‘hard to reach’, as many organisations and researchers do, also has limitations. This method risks selecting out the *least* vulnerable and failing to engage with people who are not involved with any organisation. For example, recent research into youth homelessness indicated that at least 75,000 young people experienced homelessness in the UK in 2006–07, but this data was limited to the young people who were in contact with services (Quilgars et al., 2008) and thus fails to capture the situation of those who are not in contact with services and who may therefore be in a more serious position of need.

Another obstacle may be present where individuals face incentives to remain hidden, for example those engaged in an illegal activity like drug users, undocumented migrants, young people subject to anti-social behaviour orders or dispersal orders, or rough sleepers who are increasingly required to leave public spaces where they are thought to compromise the urban environment (Fitzpatrick and Jones, 2005).

Lastly, these techniques have particular limitations in the context of the mapping needs programme which far from focusing on one or a few specific *hidden populations* seeks to research the spectrum of social needs.

In view of all of these barriers, how we can best integrate contact with ‘hidden populations’ into our research design and gain new insights into the needs and coping strategies of the groups of people with which we are concerned, in particular in light of the fact that some people may be reluctant to engage with or trust social research institutions, however innovative their approaches.

## Terminology

In the course of this paper, the people and/or groups of people of interest have been referred to in a number of ways: ‘deeply and persistently excluded’, ‘the bottom 2.5%’ and ‘laggards’ are three of the terms that have been used. We have not adopted any particular term has not been used because one of the objectives of this paper and the attached seminar is to consider how we can best talk about these individuals and groups in a way that avoids attaching stigma, isn’t underpinned by invalid

empirically assumption and has a robust conceptual basis. Each of the terms is problematic. 'Laggard' - a term borrowed from business and marketing theory - is a highly stigmatising concept that emphasises the culpability of individuals themselves in failing to meet their own needs. Referring to 'the bottom 2.5%' implies a vertical hierarchy which may not be wholly appropriate and may not accurately reflect empirical reality. The idea of 'deep and persistent exclusion' and 'social exclusion' more broadly, are intensely political terms that may compromise the extent to which the constraints of previous models and ways of thinking can be transcended. Do we need a new terminology? Do we need to return to an older set of terms?



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