

INDEX OF MULTIPLE DEPRIVATION

PROGRAMME AREA OF RESPONSIBILITY: CORPORATE STRATEGY AND FINANCE

CABINET

20TH NOVEMBER, 2003

Wards Affected

County-wide

Purpose

To endorse the issues to be addressed regarding the current consultation on the Index of Multiple Deprivation (IMD). The IMD is a list of all the 8,000+ wards in England, ranked in descending order of deprivation, based on a wide variety of factors.

Key Decision

This is not a Key Decision.

Recommendation

THAT the issues set out in this report be endorsed as a basis for responding to the consultation.

Reasons

To ensure that Herefordshire's best interests are reflected in the construction of the Index to maximise the future likelihood of accessing regional, national and European funding streams.

Considerations

- 1. The IMD is used by Central Government and regional bodies to distribute regeneration and other funds to wards. The current Index was published in 2000 based on statistics pertaining to 1998. It incorporates data on indicators in a variety of "domains" of personal deprivation: income, employment, housing, health, education and geographical access to services. With the exception of the South Wye area and other parts of Leominster and Hereford, the wards of the County rank as less deprived than many in England on most domains.
- 2. A first stage consultation on updating the Index was produced in late 2002; there was a move by some urban authorities to remove the Access to Services domain. Herefordshire Council responded to the consultation urging, among other issues, that the access to services domain be retained and that indicators relating to a lack of affordable housing be included.
- 3. The Office of the Deputy Prime Minister (ODPM) published the results of the first stage consultation in September 2003 and invited comments on the latest proposals for the Index to be returned by 14th November, 2003. Despite the warnings in the local government press that the Index would be heavily biased in favour of urban

areas, the proposed Index appears reasonably fair. The proposal to include the Access to Services domain is still on the table and the ODPM project team have also responded positively to requests from Herefordshire Council and other local authorities for a lack of affordable housing indicator.

- 4. There are however still concerns about the construction methodology of the Access to Services domain. In particular it is important to ensure that a distinction is maintained between geographical access to services and other barriers.
- 5. The way in which the ODPM propose to include housing indicators in the IMD favours does not appear to favour Herefordshire and it is proposed that we make recommendations for changes.
- 6. Other important issues include:-
 - Modifying proportions dependent on welfare benefits to allow for different take up rates between urban and rural areas,
 - Correct use of multi-variate analytical techniques which combine the indicators.
 - Indicator on homes vulnerable to flooding (recommend to be included),
 - Arrangement of census data to avoid disclosure should not distort the Index,
 - Correct population counts are used.
- 7. Once the new IMD is released (early 2004), a summary of the information will be published in the Council's Quarterly Economic Report. The Index will also be the subject of a Herefordshire Information and Research Network (HIRN) seminar in Spring 2004 (date to be arranged).

Alternative Options

To ignore the invitation from ODPM to respond to the second round of consultation. However it is important that Herefordshire's interests are pursued.

Risk Management

The risk that the Access to Services domain could be dropped or biased towards urban areas is still present. Consequently, it is imperative that rural authorities maintain the pressure on ODPM to ensure its inclusion and most favourable formulation.

Consultees

Wide networking with officers in other rural authorities. The Manager of the Rural Regeneration Zone Director of Public Health Researchers in Partnership organisations

Background Papers

None identified