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Fear of crime and the environment: systematic review of UK qualitative evidence

Theo Lorenc1*, Mark Petticrew1, Margaret Whitehead2, David Neary2, Stephen Clayton2, Kath Wright3, Hilary Thomson4, Steven Cummins1,5, Amanda Sowden3 and Adrian Renton6

Abstract

Background: The fear of crime may have negative consequences for health and wellbeing. It is influenced by factors in the physical and social environment. This study aimed to review and synthesize qualitative evidence from the UK on fear of crime and the environment.

Methods: Eighteen databases were searched, including crime, health and social science databases. Qualitative studies conducted in the UK which presented data on fear of crime and the environment were included. Quality was assessed using Hawker et al.’s framework. Data were synthesized thematically.

Results: A total of 40 studies were included in the review. Several factors in the physical environment are perceived to impact on fear of crime, including visibility and signs of neglect. However, factors in the local social environment appear to be more important as drivers of fear of crime, including social networks and familiarity. Broader social factors appear to be of limited relevance. There is considerable evidence for limitations on physical activity as a result of fear of crime, but less for mental health impacts.

Conclusions: Fear of crime represents a complex set of responses to the environment. It may play a role in mediating environmental impacts on health and wellbeing.

Keywords: Crime/psychology, Fear, Review, Environment design, Qualitative research

Background

Most research on crime and health hitherto has focused on the direct health impacts suffered by victims of crime, particularly violent crime [1-3]. However, the indirect effects of crime and its broader harms on individuals and communities may also have important impacts on wellbeing. Fear of crime is of particular interest here, as it has been shown in several studies to have a modest, but consistently significant, association with health and wellbeing outcomes at the individual level, although there is still some controversy about the meaning of this association and the direction of causality underlying it [4-6].

A number of studies have found that fear is only weakly correlated with objective measures of crime, suggesting that fear of crime is not simply a response to high crime rates [7,8]. Fear appears to be more consistently associated with conditions in the physical environment, particularly signs of neglect such as litter and graffiti [4]; it has also been hypothesized to correlate with social factors such as social cohesion, although the findings here are more equivocal.

These findings suggest, first, that fear of crime may have an impact on health and wellbeing at a population level, independently of the direct impacts on crime on victims; and, second, that fear of crime is at least in part a response to factors in the social and physical environment. Therefore, fear of crime may be of interest to researchers in public health as a potential pathway mediating the effect of community-level environmental factors on health and wellbeing.

Qualitative research may of value in understanding the place of fear in individuals’ lives, and the determinants which shape it. From a public health perspective, qualitative research may also help to fill in the gaps in our understanding of how fear of crime influences wellbeing outcomes, and to gain a greater insight into how both
relate to environmental factors. This can help to illuminate one area of the complex pathways through which environmental determinants impact on health and wellbeing outcomes.

Aim
The aim of this review was to synthesize qualitative evidence from the UK on fear of crime and the environment. The review focuses on UK evidence because qualitative research from other countries may be of limited applicability, and because a substantial body of good-quality qualitative evidence from the UK exists.

Methods
Searching
We searched the following databases. Searches were conducted between November 2010 and January 2011. All sources were searched from inception to the most current records.

- ASSIA
- CINAHL
- Conference Proceedings Citation Index
- Criminal Justice Abstracts
- Dissertation Abstracts
- EconLit
- Embase
- ERIC
- HMIC
- Inside Conferences
- Medline
- NCIRS
- PsycInfo
- Science Citation Index
- Social Policy & Practice
- Social Science Citation Index
- Sociological Abstracts
- Urban Studies Abstracts

The search strategy used took the following form:

((fear of crime) OR (crime) OR (antisocial behaviour)) AND ((built environment) OR (built environment interventions))

The full Medline search strategy can be found in web-only Additional file 1. Searches for other databases used a modified form of the Medline search strategy. No further limitations (e.g. by language or date of publication) were used in the searches.

The following additional sources were also used to locate studies:

- Google and Google Scholar (using a simplified version of the main search string and screening the first 50 hits from each);
- citation chasing from the studies included in the review;
- citation chasing from relevant systematic reviews located by the searches (i.e. which met all the inclusion criteria except that relating to study design);
- searches of websites of government bodies, research groups and other relevant organisations; and
- consultation with members of the research team and the Advisory Group.

Screening
Two reviewers coded an initial sample of records independently, with differences resolved by discussion and reference to a third reviewer where necessary. In total, 10% of the records were screened by two reviewers independently. The remaining abstracts were screened by one reviewer alone.

The following inclusion criteria were applied:

1. Does the study report substantive data on the fear of crime?
2. Does the study report substantive data on some aspect of the built environment?
3. Is the study a primary qualitative study e.g. interviews, focus groups, ethnography?
4. Was the study conducted in the UK?

The full text of all studies which met the inclusion criteria at abstract stage was retrieved and re-screened using the same criteria. Of the full text studies, 50% were screened independently by two reviewers, with differences resolved by discussion; the remainder were screened by one reviewer alone.

Data extraction and quality assessment
Data were extracted from the published study reports using a standardized form which included information on the context and setting of the study, the population, the methodology and the findings. Findings data were extracted only for direct quotes from participants cited in the study reports. Data extraction and quality assessment for all studies were carried out using Hawker et al.’s framework [9]. This tool allows for a systemic assessment by the reviewer for standard of reporting as well as appropriateness of methods. The tool includes an assessment of nine domains: abstract and title; introduction and aims; method and data; sampling; data analysis; ethics and bias; results; transferability/generalizability; implications; and usefulness. Each domain was scored from 1 (very poor) to 4.
(good), giving an overall score between 9 and 36. Overall quality ratings were then assigned as follows: high quality (A), 30–36 points; medium quality (B), 24–29 points; low quality (C), 9–24 points. Studies were not excluded or given less weight in the synthesis on the basis of the quality assessment scores.

Data synthesis
The quotes reported in the identified publications were coded thematically using a broad coding framework. Although, as described above, the initial aim of the review was to focus on perceptions of the physical built environment, it became clear at an early stage in the analysis that the social environment would also need to be included to provide a coherent synthesis. Thus, the framework included the following categories: determinants of fear in the physical environment; determinants of fear in the social environment; and consequences of fear. A grounded theory approach was used to allow for the emergence of new themes or codes within the initial coding framework.

Results
The flow of literature is presented in Figure 1. Forty studies were included in the review. Table 1 shows the studies, where they were conducted, the primary research question or focus, the data collection methods used, the population and the quality rating assigned.

Determinants of fear in the physical environment
Several factors in the physical environment are described by participants as relevant to the fear of crime. Some participants see physical security measures, such as locks, fencing or secure entry systems, as reducing fear [27,71]. However, measures in public space such as shutters and security gates are often seen as increasing fear, and as creating an unpleasant and hostile atmosphere more generally [28,47,57,67]. Excessive security measures in the home are also seen as unwelcoming and depressing, with several participants using the metaphor of a fortress or prison [26,28,39,67,71]. In particular, several participants express a sense of anger at the need for such security measures [24,26,39].

Street lighting is also frequently discussed in the studies. Many participants report feeling more fearful in poorly lit locations [19,20,28,38,40,50,53,60,67] and at night [27,28,36,41,47,57]. Lighting appears to be relevant to fear in two ways. First, it increases visibility and is thought to reduce potential hiding places for attackers [38,60,67]. Second, it gives a more pleasant and welcoming impression of the environment, partly by acting as an indicator of the presence of other people [20,67]. In some cases, participants report that the effects of lighting are outweighed by other factors which impact on fear: “I mean when I was a child we lived in the country and it was all dark lanes with no lights, but we never felt afraid” [60]. Participants in two studies express scepticism about the effectiveness of lighting as a fear reduction strategy [38,53]. Finally, specific aspects of lighting such as colour and brightness may also be relevant to fear [19,50,53,67].

Lighting also relates to the sense that the environment allows visibility (what criminologists call ‘natural surveillance’). Places which are not visible because they are isolated [18,20,38], or sight-lines which are obstructed by vegetation, landscaping or poorly designed buildings are...
<table>
<thead>
<tr>
<th>First author and reference</th>
<th>Location</th>
<th>Data collection methods*</th>
<th>Research question or focus</th>
<th>Population included</th>
<th>QA</th>
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<tr>
<td>Airey [10,11]</td>
<td>Edinburgh</td>
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<td>Alexander [12,13]</td>
<td>Newcastle-upon-Tyne</td>
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<td>Bannister [14]</td>
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<tr>
<td>Burgess [15-17]</td>
<td>Hertfordshire; nr Nottingham</td>
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<td>B</td>
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<td>Cozens [18]</td>
<td>S Wales</td>
<td>Questionnaires, focus groups, virtual reality 'walk-through'</td>
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<tr>
<td>Crime Concern [19]</td>
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<tr>
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<tr>
<td>Davis [21]</td>
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<tr>
<td>Day [22]</td>
<td>Glasgow and environs</td>
<td>Individual interviews, focus groups, observation</td>
<td>Effects of physical environment on wellbeing</td>
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<td>Dixey [23]</td>
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<td>Individual interviews</td>
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<tr>
<td>Farrall [24-27]</td>
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<td>Individual interviews</td>
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<tr>
<td>Girling [28-30]</td>
<td>Macclesfield; Prestbury (Cheshire)</td>
<td>Individual interviews, focus groups, observation</td>
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<tr>
<td>Goodey [31,32]</td>
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<td>Questionnaires, focus groups</td>
<td>Gender differences in FoC</td>
<td>Young people aged 11-16</td>
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</tr>
<tr>
<td>Hollway [33,34]</td>
<td>NR</td>
<td>Individual interviews</td>
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<tr>
<td>Hopkins [35]</td>
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<td>Innes [36]</td>
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<td>Individual interviews</td>
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<tr>
<td>Jones [37]</td>
<td>NR</td>
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<td>Perceptions of risk and constraints on behaviour, ethnic differences</td>
<td>Young women aged 11-14, most Asian</td>
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</tr>
<tr>
<td>Koskela [38-40]</td>
<td>Edinburgh</td>
<td>Individual interviews</td>
<td>Relation between FoC and built environment</td>
<td>Women</td>
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</tr>
<tr>
<td>Little [41]</td>
<td>Devon</td>
<td>Individual interviews</td>
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<tr>
<td>Mitchell [42]</td>
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<td>Individual interviews</td>
<td>Mothers’ perceptions of risk for children</td>
<td>Young mothers aged 15-24</td>
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<tr>
<td>Moran [43-45]</td>
<td>Manchester; Lancaster</td>
<td>Individual interviews, focus groups</td>
<td>Fear of violence and its relation to spatiality</td>
<td>Lesbians and gay men</td>
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</tr>
<tr>
<td>Nayak [46]</td>
<td>NE England</td>
<td>Questionnaires</td>
<td>Experiences of FoC</td>
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<td>C</td>
</tr>
<tr>
<td>Nelson [47]</td>
<td>Cardiff; Gloucester; Worcester</td>
<td>Individual interviews</td>
<td>Perceptions of security shutters</td>
<td>General population</td>
<td>C</td>
</tr>
<tr>
<td>Pain [48,49]</td>
<td>Newcastle-upon-Tyne and environs</td>
<td>Individual and couple interviews</td>
<td>Perceptions of crime</td>
<td>Older people</td>
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<tr>
<td>Pain [50]</td>
<td>Newcastle-upon-Tyne</td>
<td>Focus groups</td>
<td>Perceptions of safety</td>
<td>General population</td>
<td>B</td>
</tr>
<tr>
<td>Pain [51,52]</td>
<td>Gateshead</td>
<td>Focus groups, questionnaires, participatory methods</td>
<td>Perceptions of risk and leisure time; role of mobile phones</td>
<td>Young people aged 10-16</td>
<td>C</td>
</tr>
<tr>
<td>Pain [53]</td>
<td>Northumberland</td>
<td>Focus groups, observation</td>
<td>Perceptions of street lighting and FoC</td>
<td>General population</td>
<td>B</td>
</tr>
</tbody>
</table>
perceived to increase the risk of attack, and hence fear [19,20,38,67]. Such obstructions to visibility also create a feeling of being ‘trapped’; by contrast, a sense of ‘openness’ in the environment is reassuring [15,67].

Closed-circuit television (CCTV) is relatively rarely mentioned in the studies. A few participants express support for CCTV in general terms [18,20,28,50], but few say that it reduces fear, and several are sceptical about its effectiveness in reducing crime [20,47,50,56]. Several participants in Squires’ evaluation of CCTV are strongly critical of it, seeing it as an inadequate substitute for more substantive measures to reduce crime [56].

Determinants of fear in the social environment

An important factor relevant to fear is the extent to which one is familiar with an area. Many participants report feeling less fearful in their own area, or areas they know well, than elsewhere. “How true it is that one often feels safer in your local area... I just feel safer because it’s my local area and I know what happens there and I feel more confident” [19]. Participants describe factors which may increase fear for outsiders but are not seen as threatening by insiders. “I think it’s all right round here, I mean you see gangs of kids but they’re only young and it doesn’t bother me because it’s familiar, I mean I’ve always lived round here” [70]. In Bannister’s study, participants were asked to mark areas seen as unsafe on a map; most saw their own areas as safe and areas not known well as unsafe, such that a large proportion of residential areas were seen as unsafe by at least one participant, but none by all the participants [14].

Much of the protective effect of familiarity has to do with having strong social networks locally. Many participants report that they do not feel fearful in their own area because they know many people and are long-term residents in the area [26,27,36,48,60]. “Everyone knows everyone, so you’re not a stranger in your own town. And you just feel so safe, just in your own street and your own area” [36]. Conversely, strangers who come to the area from elsewhere are often the object of fear [27,28,60,64].

Table 1 Characteristics of the studies (N=40) (Continued)

<table>
<thead>
<tr>
<th>Study</th>
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<td></td>
<td>Effects of community factors on health Young people aged 16–20 and older people aged &gt;60 B</td>
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<td>Seabrook [55]</td>
<td>N England</td>
<td>Pair interviews, participatory methods</td>
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<td>Perceptions of risk, place and leisure time Girls and young women aged 10–17 C</td>
</tr>
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<td>Squires [56]</td>
<td>Brighton</td>
<td>Individual interviews</td>
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<tr>
<td>Taylor [57]</td>
<td>Manchester; Sheffield</td>
<td>Focus groups</td>
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<tr>
<td>Trayers [58]</td>
<td>SW England</td>
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<tr>
<td>Turner [59]</td>
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<td>Individual interviews, focus groups</td>
<td></td>
<td>Perceptions of risk and safety Children and young people aged 8–14 A</td>
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<tr>
<td>Valentine [60-63]</td>
<td>Reading</td>
<td>Individual interviews, focus groups</td>
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<td>Fear of male violence and perceptions of public space Women A</td>
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<tr>
<td>Valentine [64]</td>
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<td>Parents’ views of children’s safety in rural area Parents of 8-11-year-old children C</td>
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<tr>
<td>Walklate [65,66]</td>
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<tr>
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<td>Glamorgan; Loughborough</td>
<td>Questionnaires, focus groups, virtual reality ‘walk-throughs’</td>
<td></td>
<td>Perceptions of safety on university campuses University staff and students A</td>
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<tr>
<td>Waters [68,69]</td>
<td>S Wales</td>
<td>Focus groups, virtual reality ‘walk-throughs’</td>
<td></td>
<td>Perceptions of crime, FoC and community Older people aged &gt;65 A</td>
</tr>
<tr>
<td>Watson [70]</td>
<td>Leeds</td>
<td>Individual interviews, observation</td>
<td></td>
<td>Experiences of risk w/r/t leisure time Young mothers C</td>
</tr>
<tr>
<td>Whitley [71,72]</td>
<td>London</td>
<td>Individual interviews, focus groups, observation</td>
<td></td>
<td>Impact of FoC on mental health General population; people with mental health problems A</td>
</tr>
</tbody>
</table>

*For mixed-methods studies, this column refers to the qualitative component only. Abbreviations: CCTV = closed-circuit television; FoC = fear of crime.*
Young people, especially when ‘hanging about’ in groups, are often perceived as threatening [19,20,28,41,46,56,64], as are people using alcohol or drugs [19,20,22,24,36,50,60,69], especially large groups at pub closing time [28,45,50,60].

There is some evidence suggesting differences in fear between women and men. Women tend to express greater fear, and the focus of their fear is virtually always men [19,60]. To some extent this reflects differences in the crimes feared, with rape or sexual assault being the focus of fear for women [31,40,60], and perceived differences in physical vulnerability [48,60]. It may also be affected by ‘vicarious’ fear expressed by husbands or boyfriends or parents, which may lead to restrictions on women’s activities [21,27,31,37,48,60].

However, it also seems to reflect women’s experience of everyday harassment and relatively minor crimes such as indecent exposure [15,60]. Women’s fear appears to be more pervasive and inescapable than men’s, with several women participants expressing doubt that fear can ever be meaningfully addressed [40,60]. “You’re never safe at any time. If somebody wants to go out and attack a woman, they’ll do it” [40]. These points have parallels in the experience of ethnic minority participants [35] and lesbian and gay participants [43,45], several of whom also express a pervasive fear which is partly driven by the everyday experience of discrimination and harassment.

Consequences of fear
Relatively few participants see fear as having serious mental health impacts, although several report some degree of psychological stress as a result of fear [10,57,60]. Those who do report serious mental health consequences tend to be victims of serious violent crimes, particularly sexual or hate crimes [19,56,60], or people with pre-existing mental health problems [71]. Some participants also see fear as impacting on health as part of a broader nexus of disadvantage [10].

A much more widely perceived consequence of fear is to limit people’s activities, including social and cultural activities, sometimes leading to social isolation [12,20,50,54,55,57,71]. Participants from across the population report such limitations, but they appear to be more serious for women, older people and people with disabilities. Of particular concern from a health perspective are limitations on outdoor physical activity, especially walking and cycling, which are reported by several female participants [15,39,40,60]. Parents also report placing serious restrictions on children’s activities [21,23,37,39,60,64], even though both parents [23,64] and children [21,37] recognize the problematic effects of such restrictions on children’s independent mobility. Again, parental restrictions are often more serious for girls and young women [21,31,37,60].

More broadly, fear of crime is seen to contribute to the process by which disadvantaged areas gain a reputation as dangerous or ‘rough’, which can contribute to the social stigmatization of residents of those areas [10,12,24,56,73].

Discussion and conclusion
This is the first review to draw together the large body of UK qualitative evidence on fear of crime and the environment. Although this review is exploratory in nature and does not support strong conclusions, it helps to fill out the available theories and quantitative data which suggest that fear of crime is associated with poorer health outcomes, and that it may mediate determinants of health and wellbeing in the physical and social environment [4]. The findings of this review suggest some plausible pathways through which a number of factors in the physical and social environment may have an impact on fear, and in turn may influence wellbeing, particularly through restrictions on activities. Moreover, the findings suggest that fear of crime may play a role in generating health inequalities, since certain groups appear to be more seriously affected by fear; gender is the most obviously relevant dimension here, although age, ethnicity, sexuality and disability may all also play a role.

The relations between environmental factors and fear are complex. Aspects of the physical built environment are clearly relevant to fear to some extent, but fear often relates more directly to the environment’s social meanings than to its physical form. For example, familiarity with and social inclusion in a given context may largely nullify the potentially fear-inducing physical features of that context. Conversely, physical factors such as litter and graffiti increase fear mainly because they are taken to indicate low social cohesion and/or socio-economic disadvantage. (This applies particularly to residential areas; in public areas, such as shopping streets, parks, or public transport, the role of the physical environment may be greater). Nonetheless, it appears that most of the social factors which are relevant to fear of crime are spatially localised. This social mediation of physical cues also means that different people, or population subgroups, may come to different conclusions about the same physical environmental factors.

The social drivers of fear are complex and often contested. Several themes in the data, such as the fear of young people ‘hanging about’, appear to represent a conflict between different group norms about the use of public space. Moreover, the findings on inequalities, particularly by gender, lend some support to theories of ‘spirit injury’ which posit an important role for systemic discrimination in the genesis of fear of crime [74,75]. Such theories suggest that the latent structural violence involved in maintaining social inequalities may be as important as the manifest violence measured in crime statistics in understanding fear and its impacts on wellbeing.
Although this review was carried out according to full systematic review methodology, it has some limitations. Only a thematic analysis, focusing on directly reported primary data, was carried out. The search terms and inclusion criteria, which focused on fear of crime and the physical built environment, may have excluded a number of relevant studies (e.g. studies which focused on the social environment alone). The primary studies are heterogeneous in many respects, and generalizations across them may have limited validity.

These limitations aside, this review suggests that fear of crime may have some role to play in mediating the impact of physical environmental factors on wellbeing, particularly by acting as a barrier to outdoor physical activity. However, the ways in which the environment influences fear appear to be complex. The findings suggest that physical environmental change alone, and interventions which focus narrowly on crime reduction, are likely to have limited success in addressing fear and its effects on wellbeing. Approaches which engage with the broader social contexts of fear of crime – including socio-economic disadvantage and its symbolic meanings, and inequalities with respect to gender and ethnicity – appear to be more promising.

Additional file

Additional file 1: MEDLINE search strategy.

Competing interests
No authors have any competing interests.

Authors’ contributions
MP and MW conceived the study, with input from HT, SCu, AS and AR. KW ran the literature searches. Screening and data extraction were carried out by TL, SCI and DN. Data analysis was carried out by TL. All authors contributed to the interpretation of the findings and approved the final report.

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References
10. Arey L: "Nae as nice a scheme as it used to be": lay accounts of neighbourhood insecurities and well-being. Health Place 2003, 9:129–37.


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