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Research Paper

Papering over the cracks: How residents and professionals experience market-led regeneration in four English coastal towns

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English coastal towns were once celebrated for their salutogenic qualities; today, however, many experience persistent deprivation and poor health. Successive governments have responded with market-led regeneration programmes focused on physical infrastructure, yet health inequalities remain entrenched. This paper draws on interviews and focus groups with 140 residents and local professionals in Hartlepool, Blackpool, Hastings, and Torbay, conducted in 2023 as part of a wider study of the north-south health divide. Across all four towns participants experienced market-led regeneration as highly visible but superficial, producing short-lived improvements to the built environment while leaving the structural drivers of poor health untouched. Residents described schemes designed for tourists and wealthier incomers, reshaping their towns around middle-class tastes while obscuring poverty. Professionals recognised these limits but felt compelled to compete for whatever funding was available. I interpret these narratives through three concepts. Slow violence captures how harm accumulates across decades of cosmetic investment, symbolic violence highlights the devaluing of local culture and residents' needs, and cruel optimism helps explain why people stay attached to the promise of revitalisation despite this approach consistently failing to deliver. I argue that market-led regeneration, shaped by policy that rewards visible outcomes over redistribution, sustains inequality rather than reducing it. As governments across the globe turn to competitive funding and private capital to revive similar locales, these accounts offer caution about the ability of such approaches to reduce health inequalities. Health equity requires reforming the political and economic structures that produce inequality, rather than papering over the cracks.

Introduction

Coastal towns in England, once celebrated for their salutogenic qualities, were historically promoted as places of convalescence, where the therapeutic virtues of sea air and bathing were thought to restore health and vitality (Wheeler et al. 2012). Today, however, many coastal communities exhibit some of the worst health outcomes in the country, with higher rates of chronic illness, mental health issues, and lower life expectancy compared to inland areas (Department of Health and Social Care 2021). Many are now

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economically peripheral and structurally disadvantaged within an increasingly uneven national geography of health (Asthana & Gibson 2022). Compositional explanations for these inequalities describe coastal towns as having disproportionately older populations, as they are popular retirement destinations, leading to a higher prevalence of age-related health conditions (Agarwal et al. 2018, Department of Health and Social Care 2021). An oversupply of former guesthouses and cheap accommodation has contributed to the proliferation of houses in multiple occupation (HMOs) concentrating deprivation and ill-health (McGowan 2026). Contextual explanations emphasise the decline of traditional industries such as ports, fishing, and tourism, leaving limited employment opportunities and stagnant local economies (Agarwal et al. 2024, Asthana & Gibson 2022).

These conditions are not simply the residual consequences of deindustrialisation, they are actively reproduced through neoliberal economic systems that concentrate resources in political and financial centres while peripheralising already marginal places (Willett & Lang 2018). Neoliberalism, which reshaped the political economy of Britain from the 1980s, privileges market mechanisms, privatisation, competitive short-term funding and performance metrics (Schrecker & Bambra 2025) embedding competition and individual responsibility at the expense of redistribution and structural reform (Scott-Samuel et al. 2014). Its effects have been spatially uneven, as capital investment is drawn to already prosperous regions (Martin et al. 2026), deepening regional health inequalities (Bambra 2016). Coastal towns have been disproportionately impacted particularly by austerity-driven reductions to local authority budgets, which have further eroded public services and social infrastructure (Marmot et al. 2020).

In response, successive governments have sought to revitalise coastal towns, and other 'left-behind' areas, through regeneration initiatives ostensibly aimed at stimulating local economies and subsequently improving wellbeing and reducing inequalities (Davey et al. 2022, MacKinnon et al. 2025). Within neoliberal policy making, regeneration has been consistently framed as a market-oriented project for stimulating growth and attracting investment, rather than a vehicle for addressing entrenched deprivation and its inequitable health effects (Telford 2025). Funding secured through competitive bidding has been directed at physical infrastructure, skills development, and local economic competitiveness (McCartney et al. 2017). Recent examples include the Towns Fund, announced in 2019, which invited 101 English towns to bid for Town Deals from a £3.6 billion fund (Ministry of Housing, Communities and Local Government 2019a), and the Levelling Up Fund, launched in 2021, which allocated £4.8 billion of capital funding across the UK through competitive rounds (HM Treasury 2021). These interventions are underpinned by 'trickle-down' economic logic, assuming that capital investment, often through public-private finance, will stimulate job creation and, in turn, alleviate deprivation (Lloyd & Blakemore 2021, Walton & Browne 2010).

The evidence on whether regeneration delivers health or equity benefits is contested. McCartney et al.'s (2017) systematic review found that the quality of evidence across regeneration evaluations was generally poor. Some targeted housing-based programmes have demonstrated positive effects on physical and mental health (McCartney et al. 2017, McGowan et al. 2021), and evaluations of the New Deal for Communities programme, implemented when wider policy was oriented towards reducing spatial inequality, reported modest positive changes across worklessness, crime, education, health and housing outcomes (Batty et al. 2010, Stafford et al. 2014). Since the 1980s most regeneration programmes have been implemented alongside wider policies that intensified inequalities (McCartney et al. 2017) and it is perhaps this embeddedness in neoliberal governance, rather than the concept of regeneration itself, that shapes outcomes.

The dominant regeneration model in the UK over the past three to four decades has been large-scale, market-led or culture-led regeneration funded by central government, delivered by local authorities, and focused on physical infrastructure investment with limited community involvement (Tallon 2020). Other models exist, including community wealth-building approaches such as that adopted by Preston Council from 2013 and the Big Local programme, which prioritise community agency and local economic circulation over market competitiveness (McGowan et al. 2019, Popay et al. 2023), although evidence that these approaches reduce health inequalities is also limited (McCartney & Popay 2025). The critique

developed in this paper is directed at the market-led model that participants encountered across all four field sites.

Market-led investment in infrastructure and amenities may attract new businesses and residents but often fails to generate secure employment or economic stability for the autochthonous population (Gomez 2017, Wenham 2020) and has done little to address the underlying causes of poor health outcomes, such as job insecurity, poverty, and inadequate housing (McCartney et al. 2017, Shaw & Robinson 2010). Spatially targeted interventions also risk merely redistributing economic activity rather than creating meaningful new opportunities (Glaeser & Gottlieb 2008, Tach et al. 2025). The competitive funding model compounds this, as wealthier local authorities are better equipped to navigate lengthy bidding processes while poorer councils struggle to compete (Gibbons et al. 2021, Whitehead 2023). Moreover, even when needs-based scoring is introduced this does not guarantee equitable allocation. Despite having the lowest economic resilience score, the North East of England received £13.4 million less than its expected allocation from the Community Renewal Fund, while the South West received £9.9 million more (Camacho et al. 2023).

In addition to questions about economic viability, there are also questions over who benefits from these initiatives and why certain areas continue to experience persistent disadvantage despite repeated investment. Cole et al. (2021) argue that regeneration-induced gentrification may be salutogenic for more affluent residents, or new incomers attracted by area improvements, while disadvantaging underprivileged residents who face displacement or exclusion from new amenities. Additionally, the broader political and economic context, including austerity measures and the marketisation of local governance, raises questions about whether such interventions merely redistribute resources in ways that favour already advantaged places (Tach et al. 2025).

This paper interrogates some of these dynamics drawing on interview and focus group data from a wider study of the north-south health divide in four English coastal towns. While regeneration was not the sole focus of the research, it emerged as a recurring theme in participants' accounts of deprivation, inequality, and local and national responses to decline. The paper contributes to calls for more qualitative research in 'left-behind' areas (Etherington et al. 2022) and extends this to coastal towns, which remain underexplored in public health research (Asthana & Gibson 2022). It also adds to critical debates about whether regeneration can function as a genuine mechanism for addressing deprivation and health inequalities (McCartney & Popay 2025). I draw on three theoretical concepts to show how regeneration functions not as a pathway to revitalisation but as a mechanism that sustains harm. Nixon's (2011) notion of *slow violence* describes forms of harm that are gradual, cumulative, and often invisible, yet profoundly damaging over time. Bourdieu's (1977) concept of *symbolic violence* captures how dominant cultural values and tastes are imposed in ways that marginalise or devalue subordinate groups. Berlant's (2011) *cruel optimism* refers to the attachment people maintain to promised futures that are structurally unattainable, while her companion concept of slow death describes the gradual erosion of the capacity to imagine or invest in a different future, a chronic condition produced by the structural forces that make flourishing unavailable. Situating these findings within the neoliberal political economy, I argue that market-led regeneration produces rather than resolves inequality. The dynamics observed in coastal towns reflect what Price and McGowan (2025) call the *cycle of social violence,* structural violence embedded through neoliberal policy and enacted through slow and symbolic harms. I extend this framework through Berlant's (2011) concept of cruel optimism showing how continued hope in market-led regeneration sustains these harms and the inequalities they produce.

Methods

This paper draws on qualitative data from a wider study on geographical health inequalities in England. The wider study included a comparative ethnography of four coastal towns, Hartlepool, Blackpool (both in the north of England), Torbay and Hastings (both in southern England), undertaken by the author

between April and December 2023. All four towns are within the 20% most deprived Local Authority areas in England, although residents in the southern towns experience life expectancies on average two years longer than those in the northern towns. The comparative ethnography aimed to examine how micro and macro political and economic forces shape health inequalities across different places. Details of the towns selected, and the methods, have been reported elsewhere (McGowan 2026).

This paper draws primarily on interview data conducted by the author during fieldwork. This included one-to-one interviews, walking interviews and focus groups with a total of 140 people living and/or working within one of the four towns (Hartlepool n=34; Blackpool n=30; Hastings n=34; Torbay n=42) Of these participants, 126 were resident in the town, of whom 34 worked in the charity or voluntary sector and 19 in the public sector. Fourteen were non-residents, working in the voluntary (n=10) or public sector (n=4). Those methods were offered so that participants could engage with the research in a way that felt comfortable to them. Individual interviews supported in-depth accounts while focus groups enabled collective sense-making and shared perceptions of place to emerge.

Interviews and focus groups followed a biographical approach, inviting participants first to say how long they had lived in or worked in the town, and then asking about their perceptions and experiences of where they lived or worked (Creswell & Poth 2018). Follow up questions spanned vertical and horizontal explanations (McGowan 2026) of inequalities such as area perceptions, migration, employment, housing, education, health, community cohesion and economic deprivation. Interviews were audio recorded, transcribed verbatim, and anonymized. Participants who had given up their own time to participate were offered a £20 voucher. Ethical approval was granted by Newcastle University's Faculty of Medical Sciences Research Ethics Committee (REF: 30919/2022).

Data Analysis

Data analysis moved from open coding to identify themes related to regeneration, territorial stigma, (in)voluntary migration, precarious employment, labour exploitation, privatisation, and housing (McGowan 2026) to a second phase of analysis, for this paper. Here, all data coded as relating to regeneration were re-read to address a narrower question: how do residents and professionals experience market-led regeneration and how do they understand its relationship to health inequalities? At this stage slow violence, symbolic violence, and cruel optimism were introduced as sensitising concepts as they were visible in the first-phase codes: harms accumulating over time, whose tastes regeneration serves, and continued hope despite repeated failure. Data were recoded against each concept, and extracts that did not fit, such as welcome improvements, were retained and examined. Accounts of regeneration did not vary between the northern and southern towns, which suggests that market-led regeneration operates similarly across the divide rather than explaining it. The paper therefore presents commonalities across places and highlights contrasting narratives between residents and professionals where they arise. To ensure anonymity, only the town name, participant number, participant type (R = resident; P = professional non-resident; PR = professional resident; VR = voluntary sector worker resident) and data collection method (I = interview; FG = focus group) are provided as identifiers in quotes.

Findings

Participants reflected on market-led regeneration through the lens of decades of economic decline, recalling a steady stream of schemes, large and small, that promised renewal but delivered limited change. Viewed through recent programmes such as Levelling Up and the Towns Fund, market-led regeneration was widely perceived as 'papering over the cracks' rather than tackling the structural causes of inequality. Residents described a weariness with schemes that appeared aimed at outsiders, while professionals

recognised these shortcomings but adopted a more pragmatic stance, competing for whatever funding was available to avoid further decline.

Market-Led Regeneration as Slow Violence

Nixon's (2011) concept of slow violence describes harm that is difficult to attribute to any single cause precisely because it unfolds over time rather than in a single event. Across all four towns, participants' accounts of market-led regeneration were saturated with this temporal quality. Disillusionment was the product of schemes, each promising transformation, each delivering something narrower and more superficial than what was needed, eroding trust while the structural foundations of inequality were left untouched beneath layers of cosmetic change.

This frustration was voiced by residents and echoed by individuals working within local organisations involved in delivering such schemes. As one professional-resident in Hartlepool reflected, the town was once the 'engine room' of the British economy, offering generational jobs that disappeared from the 1980s onwards with little thought for what might replace them. Successive governments had since offered capital grants and cosmetic schemes that were disconnected from the wider economic realities that shaping local health:

> Making buildings look nice, creating infrastructure projects, superficially seeming to improve the area, aren't going to make a damn bit of difference to health inequalities (Hartlepool-PR-1-I).

This account locates market-led regeneration within a long process of industrial abandonment and managed decline, where cosmetic investment substitutes for the structural change that might address the causes of poor health. The slow violence here lies in the decades-long accumulation of interventions that individually appear as action but collectively amount to inaction on what matters. A professional in Hastings expressed the same dynamic in starker terms:

> We've had lots and lots of investment but, if I'm honest, I could rip off the cover of all that research that was done 20 years ago and just replace it with today's date. You know, the £500m worth of investment hasn't touched the surface because it's siloed investment in large capital structures but without the sustainability subsidy you need (Hastings-PR-1-I).

Emphasis on the visible over the transformative led many participants to describe regeneration as performative change, or 'papering over the cracks' of deep and long-standing deprivation. In Blackpool, one resident contrasted 'flashy' new developments with the derelict properties that still line the seafront:

> They're building a massive hotel… but you look down the prom [seafront walk] and you've got all these empty massive hotels… Why are they building these shiny new hotels when they could refurbish the ones that aren't that bad but have long since closed? (Blackpool-R-1-I).

In Hartlepool, one resident described the town's landscape as a layered record of failed investments, each generation of schemes leaving its ruins for the next:

> I remember it as a nightclub, and before that it was a burnt down wreck that was turned into a nightclub and a gym, then it closed down, and then it got burnt down again… because they're not a success, they just get left empty and so they get wrecked and then you're back to square one having spent millions on it. The hotel across the road from it, the Grand Hotel… lot of money was spent on that and now it's empty again (Hartlepool-R-2-I).

This sense of cosmetic rather than substantive change was similarly articulated in Hastings, where participants highlighted the disconnect between capital investments and the urgent social need they felt

remained unaddressed in their town. Regeneration, in this framing, was experienced as a cycle of surface-level beautification projects that failed to disrupt the core mechanisms entrenching deprivation and inequalities:

> You could paint all the shitty-looking buildings around the town centre, or along the seafront, to zhuzh it up, and you might get some benefit… It's completely the wrong funding mechanism to be tackling the inequalities, where you need to tackle emergency accommodation costs, poor housing costs, skills shortages (Hastings-PR-1-FG).

In Torbay, slow violence was compounded by projects that were scaled back, reversed, or left half-finished as political agendas and finances shifted:

> They tried to do that project for that road there, where it would just be pedestrians. They changed the layout about three or four times and now traffic is going to go back down there… they seem to put money into that and then it's like 'oh, but we'll change it back'… they change their minds and then it costs more money. They've just bought that shopping centre, planned to demolish it and rebuild it, they don't have the money now, they're just going to demolish it (Torbay-R-1-FG1).

For professionals, short-term, narrowly defined funding compounded the sense of harm accumulating without remedy. One resident who worked in the voluntary sector in Hastings captured the inadequacy of the funding model itself:

> If there's money going, you grab it, but then you think, 'Actually, all this is going to do is going to maybe help us for the next six months or year, but there's no longevity. There's no actual changing of how Hastings works. It's a short-term patch, it's a plaster. An expensive plaster, quite often, as well, [as] it falls off (Hastings-VR-1-I).

Across all four towns market-led regeneration was experienced as a recurring performance that left the underlying conditions of inequality untouched while producing the appearance of action. Participants repeatedly located the drivers of poor health in work, housing costs, and the wider economy, problems that the capital schemes in the built environment were rarely designed to address. The slow violence lies precisely in this gap, in the accumulation of interventions that look like progress, wearing down both the fabric of these towns and the people who live in them.

Market-Led Regeneration as Symbolic Violence

Bourdieu's (1977) concept of symbolic violence describes the subtle imposition of dominant cultural values in ways that marginalise subordinate groups, rendering inequality invisible or natural. In the context of market-led regeneration, symbolic violence operated through gradual reframing of what these towns were for, and for whom. Although improvements to the physical environment were often welcomed in principle, residents felt these changes offered limited benefit to the local population. In a Hartlepool focus group, one resident captured this sense of being excluded from their own town's future:

> It will look lovely, but… we won't be able to afford to do the things that they're planning… you always have to improve things but it doesn't appear to me that they're improving things for my benefit or for people like me, or for people that live here (Hartlepool-R-1-FG).

Another resident in the same focus group described decisions made without community input or consent, a resignation that shows how symbolic violence operates through the normalisation of exclusion:

> It just seems to be decisions are made in the town without people's permission. Without people asked what they want. They just do what they want… We just have to live with it (Hartlepool-R-2-FG).

Professionals in Hastings were conscious of the class dynamics shaping how regeneration needs were defined and by whom. In a process that was itself a form of symbolic violence, the voices of the most deprived residents were frequently drowned out by more articulate, better-connected incomers:

> You have very articulate middle-class down from London who will say, for the town deal money and the levelling up money, 'This is what the town needs.' whereas you've got people that are resident in the most deprived areas going, 'I can't relate to what you say we need and is it really for me, are you actually building stuff for me or not?' (Hastings-PR-1-I).

Indeed, residents in Hastings demonstrated this symbolic dimension through the erasure of the town's fishing heritage in favour of attracting a more affluent class of visitor or resident. They saw the construction of a seafront art gallery as a deliberate imposition of middle-class values and aesthetics:

> It's like we've got an art gallery, down on the seafront. Everyone didn't want it, and they were like, 'Why do we want that in the Old Town?' You know? 'The Old Town is a fishing community. We should be looking at more things to promote the fishing' (Hastings-R-1-I).

In Blackpool, tourism infrastructure was explicitly prioritised over the needs of existing residents. One resident described being rendered invisible within their own town, drawing a connection between market-led regeneration strategy and the management of working-class aspiration:

> They're always saying 'oh we've built this new cinema, we've bought this new hotel right next to the train station'… it's not for me, it's not for the residents. It's for the tourists… I feel like sometimes, they want to keep the residents down, they want to keep us from achieving anything so like we'll have some more betting shops then the ones that have them issues will be more likely to go in there and spend all of their money then they'll stay at that level (Blackpool-R-1-I).

In Torbay, a professional reflected on the growing political tension between boosting the local economy through tourism and the visible presence of poverty, associated with homelessness and open drug use, in public spaces:

> …tourism also then creates an environment whereby it's all about the image. And that creates then a move and a desire which we're feeling very acutely right now of, 'Well, if only these people weren't seen or they weren't here.' (Torbay-PR-1-I).

Where schemes promised new employment, they were seen as aimed at a different, more desirable workforce rather than the existing one. Blackpool residents discussed the proposed university development not as an opportunity, but as preparation for their own displacement within the town's service economy:

> Male R1: And then there's the Multi-versity, they're going to knock down half of Talbot Road and put a huge university-type thing
> Female R1: If we're being cynical, it's like, 'Oh yes, they're going to train people for the jobs that are needed in the future of Blackpool,' and you think, what? How to vacuum a hotel room? (Blackpool-R-3-FG2).

More broadly, these projects were frequently seen as attempts to attract skilled professionals and investment from outside rather than to create good quality jobs for existing residents. A professional

participant in Torbay acknowledged the economic logic while also recognising its exclusionary consequences:

> There are ways to do economic development and regeneration which, essentially, displaces people… there's a role for people coming in from London, from Exeter, from elsewhere… But how do you do that in a way that does not then disadvantage your other poorer people… Unfortunately, some areas do it and on paper the place is booming, but actually, when you get into some of the communities and there is no benefit from that, and in fact, the inequalities are accentuated (Torbay-PR-2-I).

In Hartlepool, a professional voiced anger toward the Levelling Up fund, seeing plans for a production village around a new film studio as designed to attract new industries and outsiders rather than the town's existing working-class population.

> Level up? Fuck off, level up. What's that all about? It boils my blood, it really does. All this nonsense about, 'Oh, we'll have a production village.' Oh champion, that'll do those lads a lot of good, won't it? (Hartlepool-PR-2-I).

Similar anger was expressed in Blackpool where a local market, regenerated ostensibly for its existing retailers, reopened as a more expensive leisure space of bars and food outlets aimed at bringing people in from elsewhere, with none of the original traders returning:

> I knew a girl who had a stall in that market, it was her family business… 'I lost my market stall'… they just cleared people out of the market, they went 'oh yeah we'll do it up and we're going to bring you back' but then they gave the contract to these other people who own half the bars in [nearby City]… it's gentrification, it's pushing local people out of Blackpool centre (Blackpool-R-1-FG).

Across all four towns, market-led regeneration was experienced as exclusionary gentrification, privileging incoming wealth and imagined futures over long-standing residents. Here, symbolic violence operates by normalising this exclusion as progress, rendering residents' needs invisible and their heritage erased.

Market-Led Regeneration as Cruel Optimism

Berlant's (2011) cruel optimism describes a continued attachment to a promise that is itself an obstacle to the better life it appears to offer. Across the four towns, participants remained attached to the promise of revitalisation even where their own accounts gave little reason to expect it. Where slow violence is the structural harm enacted on people and place over decades, Berlant's slow death is what that harm does to the people kept hoping while nothing improves. Professionals leaned into cruel optimism, tethered to the promise of revitalisation because their work and their town's future appeared to depend on it. Residents sat further along towards slow death, viewing the promise with a weariness that had not yet been fully abandoned.

For professionals, the attachment to market-led regeneration was structural rather than naïve as this was the only available model for change. A professional in Blackpool acknowledged that residents saw no benefit from regeneration but remained committed to it:

> That regeneration stuff ensures the lifetime of the town centre, I know residents don't think it's for them, but it's about securing Blackpool as the largest premier seaside resort, so much depends on it, and if that goes, we have nothing (Blackpool-PR-1-I).

Market-led regeneration is bound here to the cruel optimism of trickle-down economics promising that investment in the town centre and the visitor economy, in time, will improve the lives of residents. Professionals held this expectation despite discussing numerous previous schemes that had failed to revitalise their towns, acknowledging that the investment would not improve life for residents while continuing to pursue it. In Torbay, a professional listed the structural problems the town centre regeneration would not resolve, yet still described it as a priority:

> The prime thing has to be the town centre regeneration, we've had £39 million from the Levelling Up fund… but that's not going to fix the housing issue, we have a crisis in the health service, the trouble is to fix this problem, it's not regeneration. I personally think that sometimes we're putting a plaster on things. It's okay as a temporary fix (Torbay-PR-1-I).

A professional in Hartlepool held the same contradiction, itemising the funding the town had received and conceding that none of it would bring significant change, while still acknowledging they would not refuse it:

> There are little pots of money here, little pots there, £10 million to spend, you've got the Town's Fund which is £25 million, you've got the Levelling Up Funds, you've got £16 million for the film studio, I've got no issue with any of it, I wouldn't turn it away, I wouldn't say no to it, I just don't quite see the big idea that it's going to transform the economy (Hartlepool-PR-1-I).

While this is a clear example of cruel optimism, it is also indicative of a broken system of redistribution. Without funding there is no prospect of change, yet professionals knew it could not produce the change that they needed, locking them into managed decline dressed as investment. Residents, however, spoke of market-led regeneration more wearily, their hope worn down by decades of watching schemes arrive and fade. They remained hopeful about each new scheme but recited failed schemes more readily than they anticipated the benefits of the next. A resident in Hartlepool described how accumulated dereliction ground people down, which was why regeneration had to happen:

> It tinkers around the edge… everything derelict around here… you become downtrodden so you don't try any harder. So you've got to start, that regeneration has to happen.. But that in itself doesn't improve health outcomes, it doesn't improve prosperity… but I guess you've got to start somewhere (Hartlepool-R-3-I).

In contrast with professionals, this resident accepts regeneration has to happen but does so without an imagined future of revitalisation. What optimism remains comes through the weary phrase 'I guess you've got to start somewhere', attached to an intervention acknowledged as unlikely to make a significant difference to local people. This weariness is most visible in the way residents would recount many projects that had been started and left unfinished. A resident in Hastings traced one scheme from announcement to closure:

> It's like the Town Deal… it was capital money, so it was buildings… then we still have to find money to make that work or useful. So we got Owens, that's the old Debenhams [closed department store] building… lo and behold, they shut their doors. But they received some of this Town Deal money and it didn't work (Hastings-R-2-I).

However, the attachment to future hope had not entirely disappeared. In a Blackpool focus group, the prospect of Levelling Up money generated genuine excitement despite experiencing repeated patterns of failure:

> Well, I think when you look at the amount of levelling-up money they say they're giving us, that's a no-brainer, it should be amazing… But we're at the mercy of how the council spends it… this levelling-up money, I swear to God, it's like waiting for Christmas. (Blackpool-R-2-FG2)

This is cruel optimism starting to give way to slow death, the pleasure of the promise persisting alongside the certainty of its limits. Another Blackpool resident described casinos that had been promised, scaled back, and then taken away, yet still held onto hope for current schemes:

> I hope so, but I'm not confident… Hopefully it will create jobs but it's going to be a few at a time... Twenty years ago, when we thought we were going to get the big casinos... At first it was going to be seven, then it was going to be one, and then we didn't even get that (Blackpool-R-2-I).

Here cruel optimism is stated almost as a definition 'I hope so, but I'm not confident'. Even in this weary form, hope survived repeated failure because the system always supplied something new to attach to. As one scheme collapsed, the next hotel, casino, or development was announced, and the cycle began again. As faith in any particular scheme was exhausted, the optimism relocated. A participant in Hastings whose account of the Town Deal had collapsed into resignation transferred their hope from the funding to the community itself:

> I am very cynical about things like this, because they always sound absolutely fantastic… and then we never do [benefit], because the money gets sucked into things that, actually, people don't want… and make somebody very rich. You know, a lot of eyes will roll when you mention the Town Deal, unfortunately… but I think there is a massive community spirit in Hastings… Hastings will thrive (Hastings-R-3-I).

This relocation was similarly described by a participant in Blackpool, investing in the town's capacity to endure rather than in any scheme designed to change it.

> Blackpool is this incredible powerhouse of evolving and succeeding… even though we are at the epicentre of the worst shit that any town can actually have thrown at them, we will not die (Blackpool-R-3-I).

This relocation is where slow death becomes most visible. When the only thing left to be optimistic about is residents' own capacity to endure, the work of survival has shifted onto the people these schemes were meant to serve, who are asked to absorb their failure as resilience. As Yetiş and Bakırlıoğlu (2023) argue, drawing on Berlant, the repeated promise of a better life keeps optimism alive while preventing people from detaching from what is not working, so that harm is absorbed through the postponement of change. In the four towns, market-led regeneration supplied just enough hope to keep residents and professionals tethered to a model that managed their towns' decline, long after their own accounts had concluded revitalisation would never arrive.

Discussion

These findings highlight how market-led regeneration in England's coastal towns is experienced as a series of performative interventions that prolong and exacerbate existing inequalities. It can be understood as a form of slow violence, delivering surface-level change while leaving the underlying drivers of deprivation untouched (Nixon 2011). Participants described this model of regeneration as the continuation of decline under a different guise, a form of neoliberal harm management (Wacquant 2001), attending to the symptoms of economic marginalisation rather than its causes (Yetiş & Bakırlıoğlu 2023).

Repeated over decades, such interventions accumulate into disillusionment and resignation rather than progress.

There was a strong perception that market-led regeneration was designed for external audiences: tourists, investors, or more affluent newcomers. This form of soft gentrification gradually reshapes place identity without necessarily physically displacing residents, although it can be accompanied by rising housing costs, forced migration, and reduced access to services (Kern 2016, McGowan 2026). In Bourdieu's terms, market-led regeneration reframes what is valued in a place in ways that delegitimise existing ways of living, eroding the cultural and social capital of the autochthonous population while presenting these changes as progress (Bourdieu 1977).

This helps explain why resident participants often felt regeneration 'wasn't for them'. The strategies designed to 'improve' towns, upgrading façades, attracting new demographics, obscuring visible poverty, also marked certain populations as undesirable. Prioritising aesthetic appeal and market attractiveness over residents' needs creates a form of 'misrecognition' (Fraser 2000) in which marginalised communities are rendered invisible within their own towns. Symbolic violence normalises exclusionary change, producing compliance or resignation rather than open resistance (Bourdieu 1977). Resignation was more common among residents recognising the repeated failure of regeneration to deliver tangible benefits. For professionals, compliance stemmed from their role within the competitive funding system and the perceived absence of alternatives.

These slow and symbolic forms of violence coalesced in what Berlant (2011) terms *cruel optimism*, an attachment to aspirational futures that are continually promised but structurally unavailable. Each new initiative was framed as a turning point, only to falter under short-termism, political instability, or market logic, while the attachment kept communities invested in a vision of change that market-led regeneration cannot, and perhaps never intended to, deliver (McCartney & Popay 2025). This logic is made explicit in the UK Department for Levelling Up's 2022 prospectus for the UK Shared Prosperity Fund, which prioritised fostering 'pride in place' over tackling the structural causes of area deprivation. As Dorling (2023) notes, this initiative was less about substantive transformation than about cultivating 'good vibes', a form of cruel optimism that placates discontent, sustains political consent, and leaves the underlying inequalities intact and possibly widening.

The slow, symbolic, and cruel harms identified in this paper are predictable consequences of embedding market-led regeneration within a neoliberal political economy. As Jones (2021) argues, competitive bidding, short-term funding cycles, and an emphasis on marketable outcomes produce forms of investment that prioritise visibility over need. These dynamics explain why participants described regeneration as 'papering over the cracks', schemes are designed to deliver measurable improvements in the built environment, not to address the causes of poor health and inequality.

Taken together, the findings show how slow violence, symbolic violence, and cruel optimism are not separate phenomena but interacting mechanisms through which market-led regeneration perpetuates harm. This dynamic reflects what Price and McGowan (2025) describe as the cycle of social violence; structural violence is embedded through neoliberal economic policy and market-led regeneration enacts this through slow and symbolic practices. Cruel optimism adds a further dimension to this cycle, legitimising its continuation by deferring hope for change. In this sense, market-led regeneration becomes part of the machinery that reproduces inequality, leaving residents to experience the ongoing degradation of health, wellbeing, and place.

Strengths and Limitations

Fieldwork in four coastal towns, two in the north and two in the south, with similar levels of deprivation but different life expectancies allowed similarities and differences to be explored that might explain these spatial inequalities. Living in these towns for four to six weeks meant the author could develop trusted relationships with participants which enabled recruitment, and continued engagement, with 140 residents and local professionals. The relational nature of the fieldwork led to the author focusing on what

participants raised the most, with housing addressed in an earlier paper (McGowan 2026) and market-led regeneration here. This was a deliberate choice to foreground what was important to people living in these towns rather than focusing on what fitted the study's original aims. While viewed as a strength in terms of epistemic justice, this also creates limitations.

Regeneration, market-led or other forms, was not the main focus of the broader study which limited the breadth and depth of data gathered on this topic. Moreover, participant accounts concerned the competitive schemes active during fieldwork and the study was not designed to compare experiences across successive generations of regeneration policy. Redistributive or community-led models may be experienced differently. Demographic data were not systematically collected. Perspectives on market-led regeneration may well have differed by age, gender, ethnicity, or social class, but the data do not allow these differences to be examined. Fieldwork took place in 2023 before a change in government in 2024, and later programmes may alter some of the dynamics discussed in this paper. Finally, the main study aimed to examine the north-south health divide, not to evaluate regeneration programmes. This paper, therefore, offers an account of how market-led regeneration is experienced across these towns rather than an in-depth analysis of particular schemes or a direct assessment of their effects on health or inequalities.

Conclusion

This paper has shown that market-led regeneration in four English coastal towns is widely experienced as the routine management of decline rather than transformation. Participants described projects that improved the appearance of place while leaving the causes of deprivation, and its unequal health effects, untouched, and often seen as designed for outsiders rather than local residents, while also generating cycles of hope and disappointment. These outcomes are structurally embedded in a neoliberal model of market-led regeneration in which competitive bidding, short-termism, and an emphasis on visible, marketable outcomes produce interventions that obscure rather than address the political and economic causes of poor health. The conceptual framings of slow violence, symbolic violence, and cruel optimism, show how market-led regeneration becomes a process that reproduces inequality. If health equity is to be achieved, alternative forms of organising the economy and society are required, approaches that redistribute income, wealth, and power, addressing the structures that produce decline, rather than 'papering over the cracks'. Without such a shift, market-led regeneration will remain part of the problem rather than the solution.

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Conflicts of interest

The author has no competing interests to declare.

Data availability

The author does not have permission to share data.

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