

Glasgow Centre for Population Health response to the Draft Glasgow Community Plan consultation

August 2017

The Glasgow Centre for Population (GCPH) was established in 2004 to generate insights and evidence and inform and influence action to improve health and tackle inequality. The Centre offers an evidence-based perspective on the policy and practice domains that impact on the health and wellbeing of the population in and around Glasgow, and on inequalities in health. The socioeconomic and physical environments in which people live, grow, play, learn and work are fundamental causes of health and health inequalities^{1,2,3}. Community Planning Partners play an important part in determining what is done, and how, to shape these environments which in turn shape the lives of the city's residents, both directly and indirectly. The GCPH welcomes the opportunity to respond to this plan and contribute to its further development as appropriate to our skills and resource in future.

1. To what extent do you agree or disagree with following focus areas (p9-16)... Economic Growth, Resilient Communities, A Fairer and More Equal Glasgow?

We are broadly supportive of the identified focus areas. However, we highlight that the focus on economic growth, without a clear focus on inclusivity and fairness, has the potential to increase and exacerbate the impact of existing inequalities in the city. So that this part of the strategy is compatible with the third proposed focus area (a 'fairer and more equal Glasgow') we would encourage the authors of the Plan to make explicit the expected links between economic growth and the reduction of socioeconomic inequality.

2. In relation to the focus area of Economic Growth, which one action would you recommend partners undertake to add greatest value?

The broad approach accords with the Glasgow Resilience Strategy which prioritises fair economic growth, and we welcome this focus if fairness and inclusion are central to the approach and that the plans are for long-term, inclusive economic growth.

Low pay and poor quality work is one aspect of economic growth which can lead to continuing or exacerbating inequalities. The Joseph Rowntree Foundation has shown that the groups more likely to be in low pay or moving between low pay and no pay include women, lone parents, some minority ethnic groups, young people, people without qualifications and people with disabilities. These are sizeable groups who are at risk of

¹ World Health Organization. *The determinants of health*. <http://www.who.int/hia/evidence/doh/en/>

² Dahlgren G, Whitehead M. *Tackling inequalities in health: what can we learn from what has been tried?* Working paper prepared for the King's Fund International Seminar on Tackling Inequalities in Health. Ditchley Park, Oxfordshire: King's Fund; 1993.

³ Dahlgren G, Whitehead M. *European strategies for tackling social inequities in health: levelling up, Part 2*. Copenhagen: WHO Regional Office for Europe; 2007.

http://www.euro.who.int/_data/assets/pdf_file/0018/103824/E89384.pdf?ua=1

multiple disadvantages, and low and irregular pay is likely to further impact other householders. Economic growth that is inclusive and that proactively and explicitly seeks to ensure equal access to opportunity associated with the city's success regardless of background is therefore vital if effort and investment in, making Glasgow "the most productive major city in the UK" are to avoid perpetuating existing inequalities.

The interaction with the welfare system is a critical part of this – individuals experience fluctuations and variations of unemployment, employment, poverty and welfare support which requires a flexible and responsive system. Partners in Glasgow have limited control over some issues, i.e. those relating to the welfare system and taxation policy, but should seek to adopt policies and practices that can mitigate the impact of these on the most disadvantaged people in the city (also see our response to question 3 below).

The multiple and complex causes of Glasgow's longstanding health issues are rooted in historical and wide-ranging socioeconomic and political decisions⁴. A genuinely inclusive and fair approach to economic growth, requires recognition of the need for action across many practice and policy realms and that these actions will often influence each other. It is important that the Community Planning Partnership (CPP) delivers joint, cross-cutting solutions to inclusive growth so, instead of recommending a single policy action, we therefore suggest a number of principles that should be reflected in actions by Partners across their domains:

- Ensure that job quality is an explicit aim of Glasgow's economic strategy, as well as numbers of jobs. Consider targeting support, incentives and apprenticeship schemes towards sectors and organisations which offer opportunities for high quality work and progression.
- Ensure that actions are targeted towards reducing the specific barriers facing those groups at a high risk of low pay and job insecurity.
- Prioritise the extension of the Living Wage, particularly among women and in sectors where low pay is known to be an issue, to address health inequalities and support efforts to reduce the income ratio between the highest and lowest paid employees.
- Ensure that employability approaches support entry to high quality jobs and focus on sustaining employment and skills development and progression; build on past learning from employability programmes that achieved positive outcomes, such as the New Futures Fund for ex-offenders and substance users and the Working for Families Fund that targeted lone parents.
- Review opportunities for wider coverage of high quality and affordable childcare for those seeking work and those in work. There are specific challenges around pre- and after-school care, and school holidays (this also relates to question 8 below)
- Start early: educational attainment and skills development within schools are key to shaping future work choices and options and can help build links with local employers.

⁴ Walsh D, McCartney G, Collins C, Taulbut M, Batty GD. *History, politics and vulnerability: explaining excess mortality*. Glasgow; GCPH; 2016. Available at: http://www.gcph.co.uk/publications/635_history_politics_and_vulnerability_explaining_excess_mortality

- Inclusion of a presumption in favour of procurement practice within the public sector which supports local enterprise and local employment, particularly in areas of disadvantage (this relates to our answer to question 4 below)
- We also suggest that CPPs in Glasgow should work with the other local authorities within the Glasgow and Clyde Valley region to consider how to maximise the potential of City Deals investment to help mitigate against the effects of vulnerability in the population (for example, through capital investment in social housing or the creation of sustainable high quality employment).
- Develop measures of success that take account of inequalities and access to meaningful, well paid and sustained employment.

3. In relation to the focus area of Resilient Communities, which one action would you recommend partners undertake to add greatest value?

The commitment to support the implementation of the Glasgow City Resilience Strategy and the recommendations of the Mental Health Commission are welcome.

For resilience to have relevance to public health it must provide a framework which enables individuals and communities to withstand challenges such as poverty, inequality, worklessness and other factors that endanger health and wellbeing. This will involve reducing exposure to risks, particularly poverty and inequality, as much as supporting processes that allow communities to utilise assets, skills and develop leadership capacity in the face of anticipated and unanticipated change. Consequently, this requires action across a range of policy areas which the CPP is well placed to deliver on. From existing evidence, we propose prioritising approaches which:

- take account of the material dimensions of poverty and inequality through approaches highlighted in our response to question 2 (above).
- empower communities through developing skills of democratic participation and protect existing community infrastructure (e.g. meeting spaces) which are required to prevent inequalities in participation and build capacity for community leadership and participation to emerge or increase.
- recognise that welfare reform risks pushing claimants in the city's more deprived neighbourhoods further into poverty. Learning from projects which have co-located services, particularly financial inclusion services, in primary care and jobcentre settings highlights how existing community and third sector resources can be aligned to mitigate poverty^{5,6}.

⁵ Withington R. *NHS Greater Glasgow and Clyde Financial Inclusion Evaluation Project: Literature Review*. Glasgow: GCPH: 2011. Available at: http://www.gcph.co.uk/assets/0000/2545/HWC_Literature_Review_-_Final_Draft.pdf

⁶ Improvement Service. *Case Study: Co-location of Advice Workers in Medical Practices in Dundee and Edinburgh*. Available at: http://www.improvementservice.org.uk/documents/money_advice/ma-case-study-colocation-advice-medical.pdf

- are consistent with a networked approach to community resilience. Learning from *Open Works* (Lambeth)⁷ highlighted building a sustainable network of voluntary community projects requires around three years of support and investment for a participatory culture to embed in an area. Opportunities for participation work best when they are practical, low commitment, and with low barriers to participation (particularly cost). The activities should help people in their everyday lives (cooking, repairing, developing new practical skills). Finding ways to support such funding may require innovative approaches. Support for the governance and reporting requirements associated with external grant funding have also been highlighted.

4. In relation to the focus area of A Fairer and More Equal Glasgow, which one action would you recommend partners undertake to add greatest value?

We support the aims and workstreams outlined in the People Make Glasgow Fairer Strategy and recognise the complex and multifactorial nature of the issues and potential solutions to the scale and impact of poverty, disadvantage and inequalities in the city. No single action will be sufficient in making progress towards greater fairness; poverty proofing all policies and taking action across the range of work streams, both to prevent and to mitigate the impact of poverty at all stages in people’s lives will be required. However, here we suggest two additional actions that we feel could complement the existing work streams:

- A presumption in favour of procurement practice within the public sector which supports local employment and local enterprises, particularly in areas of disadvantage, inclusive growth and sustainability (this relates to question 2 above).
- To use the levers available to the public sector in Glasgow to make affordable and nutritious food more available and accessible to those with limited local access. Possibilities include local or community shops, food provision as part of childcare and summer camps and community services. This would complement the existing stated commitment to build long term sustainable alternatives to food banks and the focus on supporting mental health, as local community food initiatives can be a powerful vehicle for tackling social isolation and promoting mental health and wellbeing in communities.

5. To what extent do you agree or disagree with following initial priority (p7-8)...

Transport?

Strongly agree

6. If partners were to improve one aspect of transport in the city, which aspect would you suggest this be?

The cost of public transport is significant for those living in poverty. This is particularly the case for those living in Glasgow’s peripheral estates, where amenities are few and journeys to higher amenity locations are long, expensive and can involve a number of stages.

⁷ Civic Systems Lab, Lambeth Council. *Designed to Scale: Mass participation to build resilient neighbourhoods*. Available at: <http://www.participatorycity.org/report-the-research/>

Currently Glasgow has falling levels of bus use, the percentage of adults walking to work or study and of children walking to school has been reducing and levels of cycling – although they have been increasing slightly in recent years – remain very low (e.g. 2% of commuters and 3% of children travelling to school). In contrast, car use for commuting purposes and for taking children to school has been rising. Levels of pedestrian road casualties are three to four times higher in the most deprived areas compared with the least deprived. Air quality is a recognised problem in the city and there are three Air Quality Management areas in the city including the whole of Glasgow city centre.

Approaches to improving air quality (e.g. the creation of low emission zones) and safety on roads (e.g. 20 mph limits/zones) have the potential to encourage more people to travel actively, which will help in getting Glasgow's residents to be more active and in addressing rising levels of obesity in the city's population⁸.

This response makes the case for joined-up actions across a range of linked priorities.

Action is required at a number of levels (school, local area and city-wide) and across different policy domains (education, transport, planning). To help achieve this, we recommend:

- a comprehensive sustainable transport strategy for the city. This should encompass active travel, public transport, car use (including parking), air quality and safety. A focus on providing high quality, affordable, reliable and accessible public and active transport should provide the underpinning vision of what kind of city people would like to live, work and move about in.
- as well as improving local management of transport services, free or subsidised transport should be available to those on low incomes, including young people, to improve accessibility to education, employment and services, particularly for those living in more isolated locations.
- the strategy should aim to prioritise healthier and more sustainable modes of travel – such as walking, cycling and public transport – over car use.
- the strategy should also prioritise improvements to road safety for pedestrians and cyclists by establishing 20mph zones, area-wide traffic calming schemes, and segregation of pedestrians, cyclists and traffic, as the norm for residential and urban areas.
- a focus on inequalities is important in order that any changes to transport in the city benefit all groups in the city and help address existing inequalities – for example, in relation to access, economic participation, exposure to air and noise pollution, and with respect to safety. It should weave these different components into a coherent approach to making progress, including targets, milestones and monitoring.
- committed investment to enable the strategy's targets to be met.
- the strategy should also make clear links, where relevant, to other key policy areas in relation to climate change, food, health, poverty and place making.

⁸ Muirie J. *Active travel in Glasgow: what we've learned so far*. Glasgow: GCPH; 2017. Available at: http://www.gcph.co.uk/publications/702_active_travel_in_glasgow_what_we_ve_learned_so_far

Furthermore, strengthening the impact of the Place Standard for Scotland should be a priority particularly in disadvantaged areas by: providing ongoing support for its development and delivery; making it a 'material consideration' in the spatial planning system for private and public sector development; and investing in support for communities from deprived areas to use it.

Priority should also be given to improving greenspace access and quality in deprived areas by: providing access to good quality greenspace within 300m of the home for all; addressing current inequalities in greenspace quality; and supporting engagement in outdoor activities (including spaces for all to support intergenerational mixing and spaces to play that challenge children and allow for risk taking).

7. To what extent do you agree or disagree with following initial priority (p7-8)...Accessible and Affordable Childcare ?

Strongly agree

8. If partners were to improve one aspect of childcare in the city, which aspect would you suggest this be?

We support the creation of an 'anti-poverty childcare system to mitigate impact of living costs on already disadvantaged groups. This is a specific proposal by the Joseph Rowntree Foundation (JRF)⁹, and is based on flexible, year-round childcare provision (as already exists for school-age education), professionally qualified staff earning salaries comparable with those working in schools, and an affordable fee system which includes free access to childcare for those on low incomes. The Joseph Rowntree Foundation (JRF) cite evidence supporting such a transformation in pre-school childcare as cost effective with considerable later savings (e.g. from reduced social security payments, higher pay, lower costs to criminal justice systems) would exceed the investment many times over.

We strongly endorse the expansion of funded early learning and childcare as evidence suggests that the lack of affordable childcare is one of the biggest barriers to ensuring that work pays¹⁰. A presentation at the GCPH Glasgow's Healthier Futures Forum on Child and Family Poverty in 2011 argued that this is one of the reasons that Scandinavian countries have less child poverty than in Scotland¹¹. For example, it was stated that the UK spends 0.5% of GDP on childcare compared with Sweden's 2%. Additionally, in the 2016 GCPH Seminar Series lecture on poverty, Julia Unwin, Chief Executive of the JRF argued that the

⁹ Joseph Rowntree Foundation. *A Scotland without poverty*. York: JRF; 2016. Available from: <https://www.jrf.org.uk/report/scotland-without-poverty>

¹⁰ Erdman J. *Child poverty and health: making the links*. Presentation at Glasgow's Healthier Futures Forum 12: "Responses to child and family poverty". 15 December 2011. Available at: <http://www.gcph.co.uk/events/116>

¹¹ Glasgow Centre for Population Health. *Glasgow's Healthier Future Forum 12 Responding to Child and Family Poverty*. Glasgow: GCPH; 2011. Available at: <http://www.gcph.co.uk/events/116>

prospects for people with responsibilities for caring for children are persistently damaged by the lack of affordable, high-quality childcare¹².

GCPH is currently involved in evaluating a childcare pathfinder project, CHANGE, in the east of the city. This project aims to create greater capacity in childcare for children up to the age of 12 within a sustainable, long-term funding model:

- Support children and families via an approach to childcare that builds relationships, engages with and supports children and families
- Improve outcomes for children and families across a range of individual, family and community outcomes.

The learning from this project will be relevant to how childcare across the city is provided, particularly in a period where free statutory pre-school childcare is being significantly expanded across Scotland.

The GCPH is also working in partnership with the University of Glasgow, What Works Scotland and Glasgow City Council education and community planning colleagues in the development of children's neighbourhoods, also initially in the east end of the city. This initiative is placing a clear area-wide strategic focus on joining up efforts across services and sectors to ensure better co-ordination, integration of local support systems and a coherent set of networks for children and families and the communities in which they live. Going beyond the school gate this locally-owned and area-focused approach will work with families and communities to provide a coherent, holistic and sustained approach to tackling the attainment gap and reducing health inequalities, building on, utilising and unlocking the assets, resources, knowledge and intelligence of public sector organisations, the local third sector and the community.

In response to this request for one suggested action we recommend that:

- opportunities for wider coverage of high quality, affordable, flexible and accessible childcare for those seeking work and those in work are reviewed and improved, particularly for those population groups who currently struggle to find and sustain quality employment or who, despite working, are struggling to cope on a very low or unreliable income. There are specific challenges around pre- and after-school care, and school holidays. (This answer also relates to our response to question 1).

9. To what extent do you agree or disagree with the proposed 'Ways of Working' (p17)?

Tend to agree

Further comment:

While we agree that shared leadership and collaborative working are important and necessary, and that it is important that services are designed around people, it is also vital that greater power is devolved to those who live in our more disadvantaged communities so that they are able to influence and inform the decisions that affect them and their

¹² Unwin J. *Poverty in Scotland and the UK is costly, risky and wasteful, but not inevitable*. GCPH Seminar Series 12, lecture 6; 13 January 2016. Available at: <http://www.gcph.co.uk/events/163>

communities. It is not just *what* is done in and with communities, but *how* it is done that is important in improving the health and social circumstances of individuals and communities, ensuring a move from information and consultation towards engagement and involvement. The work that Community Planning Partners do with communities should therefore align with the National Standards for Community Engagement¹³ and should be undertaken using asset-based approaches¹⁴.

Ways of working need to take into account Glasgow's diverse population and methods of engagement should be tailored accordingly: languages, digital/non-digital, ages, disability. We have previously recommended that, in line with the National Standards for Community Engagement, communities are supported to engage in community planning.

Participatory Budgeting (PB) has proven a tool for engaging community participation and deepening local democracy and as a means of supporting the development of trust, reciprocity, confidence and empowerment in order to engender future working relationships¹⁵.

While we support the targeting of resources to and with disadvantaged localities communities can be made up of groups of people with shared interests (such as a sports club) and shared identities (such as LGBTQ).

10. Do you have any other comments or suggestions on the Glasgow Community Plan - Consultative Draft?

Leadership

There is a need for all Community Planning Partners to recognise, understand and act upon the impact of local decision-making on population health and provide strong civic leadership in times of political and economic difficulty. We welcome this draft Community Plan as a first step in this process. Further detail about aspects of the Plan, including the consultation process and timescale and how the final version will be used and by whom, where the data come from and how the delivery of the final plan will be monitored and reported would be helpful.

Monitoring and reporting

The Community Planning Partners should commit to regularly (perhaps annually) reporting on progress and describing trends in inequalities that relate to the focus areas and

¹³ SCDC. *National Standards for Community Engagement*. Available at:

<http://www.scdc.org.uk/what/national-standards/>

¹⁴ McLean J, McNeice V, Mitchell C. *Asset-based approaches in service settings: striking a balance*.

Glasgow: GCPH; 2017. Available at: http://www.gcph.co.uk/publications/705_asset-based_approaches_in_service_settings_striking_a_balance

¹⁵ Harkins C, Escobar O. *Participatory budgeting in Scotland: design choices & delivery principles*.

Glasgow: GCPH; 2015. Available at:

http://www.gcph.co.uk/publications/605_participatory_budgeting_in_scotland_design_choices_delivery_principles

commitments in the Community Plan. We would be keen to work with the CPP to develop an inequalities-focused monitoring plan.

In line with the National Standards for Community Engagement, we recommend that communities need to have a say in assessing the delivery of the Plan; determining how progress, performance and evaluation will be measured and reported. The Community Empowerment Act places a duty on community planning partners to report on their progress to communities. Ways of working need to reflect the shift in power put forward by the Community Empowerment Act so that communities have a real say in how services are designed, delivered and assessed.