

SURF CONFERENCE

HEALTH, WELLBEING AND REGENERATION IN A COLD CLIMATE

THE ROLE OF LOCAL GOVERNMENT

Introduction

I researched and drafted these notes some weeks before the SURF conference. Since then, I have found myself reflecting on the central question of what should be the role of local authorities?

With the current squeeze on public finances, the media will force this discussion on those who work for local government, politicians, those who receive services.

In the paper I set out to give a potted history of how local government services have developed and I end up with a paradox which is central to this debate.

I need to make clear at the outset that my views are personal and are not necessarily those of my employer or any of the groups I am a member of. I am not a historian or an academic and I stand to be corrected in some of my historical references. I do, however, increasingly feel that taking a long view helps us to see how local authorities have developed and what we might expect them to do for us in future.

Public Health

The formation of local authorities and the expansion of their functions are related closely to the growth of cities, industrialisation and the emergence of public health crisis.

Local authorities were first established to run the poorhouse and co-ordinate public health functions such as sewage and cleansing. This expanded to public housing and other services such as provision of burial grounds and education etc. On the back of industrial philanthropists, local authorities adopted parks "to give the workers a chance to recreate" libraries and schools - so their functions expanded.... Many of the services which are part of the tax funded local authority provision started life as voluntary organisations.

There are different explanations for the expansion of functions - Victorian philanthropy, moral panics, hard-headed business or rank self-interest - you choose?

Until 1947, the Director of Public Health was a senior member of the management team of the local authority. One of the fiercest debates at the outset of the NHS was whether the hospitals should be run by local authorities. In the end, the minister for health, Aneurin Bevan, decided against local democracy and in favour of a national health service. His arguments included the fact that equality of treatment could not be guaranteed if facilities varied with local finances. Between 1948 and 1974 there were tripartite arrangements which included environmental health, social services and the NHS.

Local authorities have always seen themselves as promoting "wellbeing" and working to improve the "quality of life" of their citizens. In most cases, that is what got elected members re-elected.

The focus on housing-led regeneration and the separation of functions between the NHS and local authorities has allowed our thinking about the point of regeneration to shift - unhealthily! At the same time, the purpose of local authorities has remained but the funding base has narrowed.

The 1980's saw a shift from public to private sector provision in all aspects of health care but especially in the provision of continuing care for priority groups (elderly people and people with learning difficulties, mental illness, and physical disabilities).

If the 1980's signalled the end of the era of publicly financed public sector provision, the 1990's marked the end of the principle of publicly controlled and managed services. The NHS and Community Care Act 1990 changed the constitution of health boards, excluding locally elected councillors and trade union representation. More profound was the removal of local hospitals and community services from direct health authority control, with the establishment of trusts and trust boards.

If there is one aspect of the public sector that should be jointly governed and that should have democratic accountability, it is public health.

The Role of Local Government

We could have an animated debate about who we believe is best placed to provide services - the private sector, the not for profit sector or the public sector. We may yet get back into that territory, but initially I want to sidestep what are essentially political perspectives on how services should be delivered, to look specifically at what local authorities deliver directly or through commissioned services and how they contribute directly to the promotion of health and wellbeing.

What do Local Authorities Do?

The shape of a local authority, departmentally, will tell you a lot about the view of its senior management and its elected members in relation to the organisation of the services it provides.

Key local authority functions:

- Education
- Social Work
- Planning & Economic Development
- Housing
- Leisure, Arts & Communities
- Waste Management/Environmental Services
- Support Services

For well over a decade, Dundee has been one of those authorities which has prioritised investment in community engagement and which has sought to sustain an active partnership with community representatives and the voluntary sector. When faced with the requirement to close projects and

buildings, it has done so strategically to maintain a presence for community contact and access to information in most localities.

When Dundee City Council came into existence in 1996 it created a new department which brought together services from the former Regional and District Councils to:

- localise service delivery
- engage citizens
- build stronger communities
- maintain a social, resource of information point within walking distance of every home

This approach has been adapted in the light of experience and additional functions have been added, but the basic premise of joining-up community facing services has been maintained.

Many of the services which improve mental wellbeing and which contribute to "quality of life" are discretionary. In other words, they are vulnerable and no matter how much they may be loved by the general public and wanted by politicians, they are not protected in the same way as some other statutory functions.

Promoting Creativity

Throughout much of the literature of Wellbeing, the importance of enabling people to be creative is emphasised.

The government strategy on mental wellbeing highlights a list of things that can be done to promote mental wellbeing and these include:

- regular exercise
- lifelong learning
- engagement with the environment
- involvement in the community

This is, or should be, the core business of a Leisure & Communities Department.

In Dundee there has been a strong commitment to involving people and giving them greater influence over their local environment, the things which affect their neighbourhood - in effect, to build stronger communities.

Dundee has a well established network of Local Community Planning Partnerships chaired by eight second tier officers drawn from across Council departments.

The city's parks, sports facilities and programmes provide unrivalled opportunities for access to exercise, and fitness in a way which is sensitive to different levels of ability and different financial circumstances.

The Dundee Healthy Living Initiative plays a key role in the promotion of positive lifestyles and supporting people to become more active. It remains a

jointly funded and managed partnership between the Local Authority and NHS.

Staff teams like the Urban Rangers/Countryside Rangers/Environment Team/Parks Development staff and projects such as Broughty Ferry Environmental Project/TWIG/ Green Gym and many others provide opportunities for people to engage with their local environment.

Lifelong Learning

When we talk about lifelong learning, our starting point is a concern for those who have missed out first time round. The City Council has a significant literacies programme delivered, in part, by its own staff and in partnership with Dundee College and some voluntary organisations. Literacy and numeracy tuition addresses fundamentals of wellbeing.

With independent adult guidance (young people and adults) can be supported to re-engage with learning. This curriculum, of necessity, starts from the motivation of the learner and their interests. While it might share common goals in relation to skill and employability, its starting point is fundamentally different from that of schooling or training.

Opportunities for lifelong learning are supported by a network of community centres, community libraries with free Internet access, the mobile library service, local history groups, specialist projects and partnerships.

This work contributes directly to improving the quality of life and the promotion of wellbeing. Service areas such as Arts and Heritage contribute directly to this and it is for this reason that we have provided significant funding to Heritage initiatives/ Dundee Contemporary Arts/The Rep/music development/community festivals and a number of arts projects.

The sheer number of people involved in 'cultural' activity on a weekly and monthly basis throughout the year is very significant. It is at the heart of building good "community relations".

This work cannot be delivered by a local authority working alone. It has to be generated in partnership with a range of other stakeholders and partners. While much of it can be planned - it must also be spontaneous and opportunistic.

There is no better example of this than in the acceptance of volunteers and volunteering. Volunteers run community groups, organisations and sport; they support services, they work to improve the environment and they are at the heart of wellbeing for individuals and communities.

Universal but Targeted

One of the dilemmas a local authority faces is how to manage the requirement to provide services to all its citizens and a need to target services in response to particular economic or social disadvantage. At best, local authorities operate as a mechanism for discreet redistribution of resources.

Rather unfashionably, Dundee City Council has had in place and has sustained a commitment to an Anti-Poverty Strategy since 1999 which seeks to screen policies against the impact they will have in relation to poverty.

The Cold Climate

The most recent budget round has thrown into sharp relief the tension between providing services for those with specific needs and providing a universal level of service for all, many of whom in a city like Dundee will be on low incomes.

The increasing costs of meeting the needs of vulnerable people, whether young or old, and the costs of responding to social problems related to drug and alcohol misuse are taking resources away from those areas of service which promote wellbeing for all, but which are arguably less critical.

Most local authorities across Scotland have reduced their investment in community-based adult learning/libraries/sports development/parks and the environment and have increased their investment in children's services, particularly social work and the care in the community.

The Paradox

It is a painful irony that, today, everyone wants more of those services which contribute to wellbeing and which in the words of the World Health Organisation Declaration "reinforce protective factors". At the same time as this recognition, demand has been created the funding available to support public services has never been tighter. It is this paradox that forces us back into a debate about what local authorities are for.

They started as a very basic safety net - is that a vision of the past or the future? Are we prepared to accept a higher level of taxation if we are to use local authorities and those voluntary sector organisations commissioned by them to improve our quality of life and to address the issue of health, wellbeing and equity?

I don't think we can continue to have it both ways!

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