Voluntary Health Scotland
Annual Conference and AGM
11 November 2015

#ClosingtheGap2015  Twitter:@VHSComms
Trisha McAuley
Conference Chair

#ClosingtheGap2015  Twitter:@VHSComms
Claire Stevens
Voluntary Health Scotland

#ClosingtheGap2015  Twitter:@VHSComms
Health Inequalities – Whose Business is it anyway?

My business is a Fairer Scotland

Shirley Laing – Deputy Director
Social Justice and Regeneration
Scottish Government
Why tackling health inequalities means tackling poverty
90-100% CHANCE OF DEVELOPMENTAL DELAYS WHEN CHILDREN EXPERIENCE 6-7 RISK FACTORS
Healthy Life Expectancy

- **Healthy life expectancy** has been gradually increasing in Scotland, yet there remains a significant gap between the most and least deprived areas.
- Men and women in the 10% most deprived areas live in good health for over 20 years less than those in the 10% least deprived areas.
- 10% of men in Scotland can expect to live for **only 46 years in good health**, and 10% of women in Scotland can expect to live for **only 50 years in good health**.
This is What Poverty in Scotland Looks and Feels Like
There were welcome reductions in poverty before housing costs for some groups in the most recent year, 2013/14.

**Poverty before housing costs**

- **14% of children were living in poverty in 2013/14**
- **14% of working-age adults were living in poverty in 2013/14**
But after housing costs, the picture is less clear cut. More than one in five children were in poverty using this measure.

Before housing costs...

Poverty after housing costs

- 14% of children were living in poverty in 2013/14
- 22% of children were living in poverty in 2013/14
- 14% of working-age adults were living in poverty in 2013/14
- 19% of working-age adults were living in poverty in 2013/14
**What is poverty? Making difficult choices**

**DOING WITHOUT NECESSITIES**

“Poverty is not being able to do things that are necessities. Things that are important, like gas and electric, showers, bus fares, and having to worry that your daughter has a hole in a pair of shoes. She needs new shoes and I don’t have the money. What do I do? Do I get gas or do I get shoes?”

**HAVING LIMITED OPTIONS**

“She just wanted money for her birthday so she could put it towards her school trip to the outdoor centre. And I just felt so sad that that’s what she had to ask for - for her birthday. Children should be children and not have that worry.”
What is poverty? Dealing with stress and anxiety

SURVIVAL

“I can’t survive on the minimum wage. I don’t earn enough to feed me and my family and have to borrow from other family members at the end of the month.”

STRESS AND ANXIETY

“Everything is going up in price. Everything except my wages. I worry so much I am making myself ill. I can’t afford to put the heating on, so sit in the cold and go to bed early. I don’t know what I’m going to do.”
CHOOSING LESS HEALTHY FOOD BECAUSE IT’S MORE AFFORDABLE

“...I want to feed my family a healthy diet, but rising food costs prevent me from doing so. I can buy 20 sausage rolls for the price of one melon; or five packets of biscuits for the price of a loaf of bread. The unseen costs of cooking meals are also a barrier I face. I have a prepayment meter. It costs me £4.00 to cook a chicken in the oven, so instead I opt for unhealthy ready meal chicken dinners, which only cost 12p to cook in a microwave.”
What is Government’s role in tackling this?

• Strategy
• Mitigation
• Creating a Fairer Scotland
The Strategy sets out an innovative measurement framework which addresses both the wide range of drivers of poverty as well as the impacts poverty has on the lives of children and their families.

The measurement framework is based around the 3 Ps – Pockets, Prospects and Places, with a number of indicators for each theme.

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<th>Pockets</th>
<th>Prospects</th>
<th>Places</th>
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<tr>
<td>Maximised financial entitlements of families on low incomes</td>
<td>Children from low income households have improving levels of physical and mental health</td>
<td>Children from low income households live in high quality, sustainable housing</td>
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<td>Reduced household spend of families on low incomes</td>
<td>Children from low income households experience social inclusion and display social competence</td>
<td>Children from low income households grow up in places that are socially sustainable</td>
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<tr>
<td>Families on low incomes are managing their finances appropriately and are accessing all financial entitlements</td>
<td>Children from low income households have improving relative levels of educational attainment, achieving their full potential</td>
<td>Children from low income households grow up in places that are physically sustainable</td>
</tr>
<tr>
<td>Parents are in good quality, sustained employment in line with skills and ambitions</td>
<td>Young people from low income backgrounds are in good quality, sustained employment in line with skills and ambitions</td>
<td>Children from low income households grow up in places that are economically sustainable</td>
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• The latest annual report on the strategy was published on 9 October. Performance against the majority of indicators was maintaining or improving.

• Concerned by legislative changes being made by UK Government – including the removal of income-based targets, and the removal of the child poverty aspects of the Social Mobility & Child Poverty Commission.

• In consultation with our Ministerial Advisory Group on Child Poverty, our Independent Poverty Advisor and other stakeholders we will build on the existing measurement framework to develop a Scottish approach to tackling Child Poverty - reflecting the importance we continue to place on this challenge.
The Scottish Government has spent £296 million since 2013-14 on mitigation activity.

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<td>Scottish Welfare Fund (£33 million plus admin)</td>
<td>38</td>
<td>38</td>
<td>38</td>
<td>114</td>
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<tr>
<td>Other Welfare Reform Mitigation</td>
<td>7</td>
<td>8.2</td>
<td>8.2</td>
<td>23.4</td>
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<tr>
<td>Council Tax Reduction Scheme</td>
<td>23</td>
<td>23</td>
<td>23</td>
<td>69</td>
</tr>
<tr>
<td>‘Bedroom Tax’ Mitigation</td>
<td>20</td>
<td>35</td>
<td>35</td>
<td>90</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>104.2</td>
<td>104.2</td>
<td>296.4</td>
</tr>
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</table>

But this cannot compensate for the £6 billion support withdrawn since 2010.
Income Inequality constrains economic growth and increases health and social inequalities

...policies to reduce income inequalities should not only be pursued to improve social outcomes but also to sustain long-term growth.


...policy makers need to be concerned about the bottom 40 per cent ... including the vulnerable lower middle classes at risk of failing to benefit from the recovery and future growth. Anti-poverty measures programmes will not be enough.


The extreme inequalities in incomes and assets we see in much of the world today harms our economies, our societies, and undermines our politics.

Whilst we should all worry about this it is of course the poorest who suffer most, experiencing not just vastly unequal outcomes in their lives, but vastly unequal opportunities too. […] any real effort to end poverty has to confront the public policy choices that create and sustain inequality.

PROFESSOR JOSEPH STIGLITZ
Health and social problems are related to income differences within countries but not to those between them.

Health and social problems are worse in countries with greater income inequalities.

Health and social problems are not related to average income in rich countries.

Increasing average income and decreasing poverty does not necessarily address the inequalities in society.

Creating a Fairer Scotland – What Matters to You?

Vision: By 2030 Scotland is a place where people are healthier, happier and treated with respect, and where opportunities, wealth and power are spread more equally.

• Launched discussion in June. What issues matter most to you? What do you think needs to be done to create a fairer Scotland? How can you and your community play a role in helping to shape our future?
• By September over 1,500 people engaged in a series of Regional events.
• From September to the end of November 102 conversations taking place; with over 4,000 people signed up to take part.
• Social media platforms 15,000; 100,000 personal Facebook feeds and approx. 5,000 profile visits on twitter every month.
• Social Justice Action Plan published Spring 2016
Keep in Touch

Join the Discussion online at: www.fairer.scot

@scotgovfairer / #fairerscotland
fairer.scot

@fairerscotland / #fairerscotland

Share ideas on our dialogue app
Anne Jarvie video presentation

https://vimeo.com/129898123
Anne Jarvie CBE
Commission on Housing and Wellbeing

#ClosingtheGap2015  Twitter:@VHSComms
Hilda Campbell
COPE Scotland
The lived reality of health inequalities
Living with Inequality video

https://vimeo.com/116403241 (5.06min)
COPE working with the community for the community to tackle inequality
COPE Scotland @COPEScotland · May 23
@COPEScotland delighted to have had such a good response to the first two day training for wellbeing activists
RAS

Reticular Activating System
There can be up to 2,000,000 bits of data at anytime
Kindness Day is a celebration of kindness across the UK and encourages kind acts to be performed on a nationwide scale.

Pledge your Kind Act or Kindness Initiative for Kindness Day UK
Sir Alex Ferguson

“Kindness is a universal language regardless of age, nationality or religion.”

Click here to read full letter

Prof Lord Richard Layard

“Kindness is like mercy: it blesses him that gives and him that takes.”

Dalai Lama

“The development of a kind heart, or feeling of closeness for all human beings, does not involve any of the kind of religiosity we normally associate with it...It is for everyone, irrespective of race, religion or any political affiliation.”

Sir Mark Walport - Wellcome Trust

“Not many of us are in a position like Henry Wellcome to leave a large sum of money for research or to make scientific discoveries and medical breakthrough ourselves. Acts of kindness, however, do not have to be on this scale and I hope that "Kindness Day" encourages us all to help others in any way we can.”

Click here to read full letter

Jilly Cooper

“I think we ought to have a kindness year, or a kindness century.”
Quotations about kindness that have been exclusively thought for Kindness UK.

**Joanna Lumley**

“True religion is just kindness.”

[Click here to read full letter](#)

**Paul Zak - Neuroeconomist**

“Showing kindness causes oxytocin release in the recipient that motivates him or her to be kind to others. You can start this virtuous cycle in the simplest ways, for example, by giving someone a hug. I send you a hug!”

**Gary Lineker**

“Every act of kindness is potent and lingers long in the heart of the recipient.”

[Click here to read full letter](#)

**Jo Brand**

“I think it's really important to be kind, especially to people whose lives are grim - I try hard to cheer people up in as many ways as I can - if all else fails - I tell 'em a joke.”

[Click here to read full letter](#)

**Dame Barbara Stocking - Oxfam**

“There can be no greater act of kindness than to help others when your own world has been destroyed.”

[Oxfam](#)
Building a Creative Nation

BLOG  APPRENTICESHIPS  ADVICE & RESEARCH  CONFERENCE  AWARDS  SUPPORT US

Find funding
Final deadline for Creative Employment Programme applications is 13 November

Let's put the glamour back into craft
New costume centre is helping make craft glamorous

9 trends in creative employment
The creative sector is buoyant, but young people can't find the jobs. It's not hard to see why those with an enthusiasm to work in the arts are confused

Book early bird conference tickets
Join Darren Henley and many more for our 2016 conference

Education partners
Developing quality education and training for the creative sector
Take on an apprentice in Scotland

Information about funding, eligibility and frameworks for taking on an apprentice in Scotland.
UNESCO City of Design Dundee

www.dundeecityofdesign.com
What will we do?

Our **aims** include:

- use design to solve the social challenges faced by Dundee;
- develop local design talent through supportive commissioning and procurement;
- embrace design principles in our work, from designing new projects to redesigning existing approaches;
- build in regular evaluations of major activities and events, applying a design approach to ensure we always look for improvements, particularly in terms of social impact;
- use our resources to promote designers working with, or linked to, our organisation;
- work collaboratively with Dundee city partners across the public, private and third sectors to create international partnerships with the other UNESCO Cities of Design;
About Glasgow City of Science

Glasgow City of Science is a pioneering partnership that aims to ensure everybody in the city region benefits from our world-class science and technology.
Creative Competition
Welcome to Scottish Government's Dialogue

This site is used to post a variety of policy challenges. We want your ideas and comments about the things you care about and would like to influence.

We're keen to hear from you!

Current Challenges

Healthier Scotland
The Scottish Government is inviting you to have your say on what a healthier Scotland should look like in the next 10 to 15 years

#fairerscotland - Governance & Participation
We want your ideas on how to make a Fairer Scotland on the theme: Governance & Participation.
Hope for Peace

for the wild life
of the bay and the land and people
we have taken over.

LIVE

LIVE Constitution.

Memories.

I go there and help the prisoners to escape.
(CIA, retired)

LIFE

We torture to CUBANIL'S in C. JAILS, be curbed.

Close Guantanamo and build into a research center for peaceful arts.

Who decides the destinies of humanity?
LINKS

Living with Inequality video https://vimeo.com/116403241
http://www.cope-scotland.org/
http://www.kindnessuk.com/world_kindness_day_kindness_day_uk.php
http://academy.alliance-scotland.org.uk/be-part-of-the-conversation
http://ccskills.org.uk/supporters/building-a-creative-nation
http://ccskills.org.uk/downloads/Building_a_Creative_Nation_-_Evidence_Review.pdf
http://www.dundeecityofdesign.com/
http://www.glasgowcityofscience.com/about-us
http://academy.alliance-scotland.org.uk/
http://fairer.scot/
end
Thank you to our conference exhibitors:
Making Health Inequalities Politicians Business

Political Panel:
Jackson Carlaw MSP
Jim Eadie MSP
Jim Hume MSP
Jenny Marra MSP

#ClosingtheGap2015  Twitter:@VHSComms
Professor Carol Tannahill
Glasgow Centre for Population Health

#ClosingtheGap2015  Twitter:@VHSComms
Health Inequalities are Everyone’s Business

Prof Carol Tannahill
Director
Glasgow Centre for Population Health
My Business is the health of the population

- Scotland’s health – how it’s changing
- Health inequalities – how our understanding has developed
- The GCPH – working on how to make a difference
- The voluntary health sector – opportunities and challenges
Health in Scotland

Three key messages
Proportionate contribution of 10 major causes of death as a % of all selected causes among Scottish men aged 15-74 years, 1955-2010

Source: WHOSIS (April 2012)
Proportionate Contribution by Cause - Females

Figure S2F
Proportionate contribution of 11 major causes of death as a % of all selected causes among Scottish women aged 15-74 years, 1955-2010
Source: WHOSIS (April 2012)
Loneliness

• The most terrible poverty is loneliness, and the feeling of being unloved. (Mother Teresa)

• When you're surrounded by all these people, it can be lonelier than when you're by yourself. You can be in a huge crowd, but if you don't feel like you can trust anyone or talk to anybody, you feel like you're really alone. (Fiona Apple)

• If one's different, one's bound to be lonely. (Aldous Huxley)

• What should young people do with their lives today? Many things, obviously. But the most daring thing is to create stable communities in which the terrible disease of loneliness can be cured. (Kurt Vonnegut)
Multi-morbidity and deprivation

Premature mortality by social class

Age-standardised all-cause mortality rates by Social Class, England and Scotland, males aged 20-64, 1991-93

(Source: Scottish Executive, 1993 (from data originally presented by Uren et al, 2001))
Life expectancy in Scotland

Male life expectancy at birth by SIMD deprivation decile, Scotland 2008-2010
Source: National Records of Scotland

81.4
68.2
65.0
70.0
75.0
80.0
85.0
1 (most deprived)
2 3 4 5 6 7 8 9 10 (least deprived)
Addressing Health Inequalities
Global forces
Political priorities
Societal values

Distribution of power and resources (material & non-material)

Differences in provision of opportunities, environments, services etc

Differences in capacity to benefit from opportunities

Inequalities in outcomes

FUNDAMENTAL CAUSES

WIDER ENV. INFLS

INDIVIDUAL CIRCS

Personal and household characteristics
Global forces
Political priorities
Societal values

Distribution of power and resources (material & non-material)

Differences in provision of opportunities, environments, services etc

Differences in capacity to benefit from opportunities

Inequalities in outcomes

FUNDAMENTAL CAUSES

WIDER ENV. INFLLS

INDIVIDUAL CIRCS
Core principles

1. Level Up
Core principles

1. **Level Up** ... recognising that achieving change among those with greater need may involve more intensive services/higher costs

   ... and that sometimes the most advantaged will also need to experience change (for ethical, economic or sustainability reasons)
Core principles

1. Level Up

2. Focus on causes not consequences
Core principles

1. Level Up

2. Focus on causes not consequences ... Act to reduce inequalities in life circumstances ... remove (price and other) barriers to access ... make positive outcomes and behaviours easier ... remember the fundamental causes of inequality
Core principles

1. Level Up
2. Focus on causes not consequences
3. Start young
Start young

• Inequalities are evident even in the earliest years of people’s lives, not only in outcomes, but particularly in risk behaviours that we know have longer-term consequences for health and development (*Growing Up in Scotland*).

• A good start in life doesn’t guarantee good outcomes, but is associated with a range of personal and social benefits.
Core principles

1. Level Up
2. Focus on causes not consequences
3. Start young
4. Target, tailor and positively discriminate
Core principles

1. Level Up
2. Focus on causes not consequences
3. Start young
4. Target, tailor and positively discriminate ... in favour of disadvantaged people and places ... Universal doesn’t mean Uniform ... consider proportional and additional approaches
Core principles

1. **Level Up**
2. **Focus on causes not consequences**
3. **Start young**
4. **Target, tailor and positively discriminate**
5. **Build resilience** ...This will help reduce inequality with each new wave of challenge ...Resilience requires networks, personal skills and a conducive environment
The GCPH

The Centre’s mission is to generate insights and evidence, support new approaches, and inform and influence action to improve health and tackle inequality.
• Working with a wide range of stakeholders, the GCPH:
  – Stimulates, carries out and facilitates research
  – Provides a focus for the exchange of ideas, fresh thinking, analysis and debate
  – Supports processes of development and change
We need both knowledge and know-how

• With social interventions:
  – there is no single method or formula
  – what is done and achieved will vary from case to case
  – routinisation often hinders performance
  – flexibility, responsiveness, and context-specific approaches are essential

• Know-how “moulds and supports the practice used in a field as performed by those skilled in the art” (Nelson, 2010)
This is what we see too often

**Problem space:**
- Disease prevalence
- High premature mortality
- Multi-morbidity
- Health inequalities

**Causes:**
- Poverty & deprivation
- Lifestyle choices
- Access to services

**Solution space:**
- Disease prevention
- Disease management
- Structural solutions
## An alternative ‘solution space’ (Wilber’s integral model)

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<td><strong>A</strong> “I”</td>
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<td>Culture and shared values</td>
<td>Institutions, systems and processes, nature</td>
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**Individual**  

**Collective**
Expanding the solution space

• Redressing the balance between meeting needs and nurturing strengths
• Recognising the importance of relationship: to self and to others
• Not a replacement for service improvement or addressing the structural determinants of health inequalities
• Embedded alongside good public service provision, support and interventions
Challenges and opportunities for the Voluntary Health Sector
An alternative ‘solution space’ 
(Wilber’s integral model)

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Global forces
Political priorities
Societal values

Distribution of power and resources (material & non-material)

Differences in provision of opportunities, environments, services etc

Differences in capacity to benefit from opportunities

Inequalities in outcomes

FUNDAMENTAL CAUSES

PERSONAL

INDIVIDUAL

CIRCS

WIDER

ENV. INFLS
The sector’s role can involve

1. Lobbying & advocacy
2. Redistributing power

The fundamental causes
The sector’s role can involve

1. Lobbying & advocacy
2. Redistributing power
3. Providing good, fair work
4. Contributing to the economies & environments needed for wellbeing

Greater equality of environmental influence/opportunity
The sector’s role can involve

1. Lobbying & advocacy
2. Redistributing power
3. Providing good, fair work
4. Contributing to the economies & environments needed for wellbeing
5. Mitigating the effects of deprivation – individuals’ circumstances
The sector’s role can involve

1. Lobbying
2. Redistributing power
3. Providing good, fair work
4. Contributing to the economies & environments needed for wellbeing
5. Mitigating the effects of deprivation
6. Expanding the range of outcomes that count
The sector’s role can involve

6. *Expanding the range of outcomes that count ...*

- “things like building social networks and self-esteem: these should be as important as (ill-)health outcomes”;
- “...is it better to imprecisely measure the right things or to precisely measure the wrong things?”
- don’t forget to tell the story - and do help us to shift the balance of measures and metrics
The sector’s role can involve

1. Lobbying
2. Redistributions power
3. Providing good, fair work
4. Contributing to the economies & environments needed for wellbeing
5. Mitigating the effects of deprivation
6. Expanding the range of outcomes that count
7. Applying and generating evidence & insights
8. Working with - and out with - the ‘system’
Experiment, learn and change

- Collaboration and networking
  - Adequate infrastructure
  - The innovation narrative
- Distributed leadership & multi-directional influence
  - Fidelity and flexibility
The oak and the reeds
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