

8 Local Government – what does it mean for the frontline?

The centrality of local government in tackling the social determinants of health and reducing health inequalities and the challenges local authorities must meet have been set out in no uncertain terms in the previous chapters. This chapter looks in more detail at some of the different local authority functions and how they impact on health. These are:

- children's services
- adult social care
- planning and transport
- housing
- environmental services
- culture and sport
- work, worklessness and the local economy.

The case studies within this chapter provide real-life illustrations of how a range of local authorities are using these functions to mitigate some of the negative aspects of the social determinants of health, and reduce inequalities between areas and groups. The discussion of different functions below is not intended to be comprehensive, but to give an indication of the variety and scope of the potential for action and of the interventions currently taking place.

Children's services

One of the key outcomes for children and young people to emerge from the policy changes following the first Laming report on the death of Victoria Climbié is the 'Every child matters' outcome 'Stay Healthy'. This puts improving health outcomes for children and young people at the heart of local authority services. Local authority children's services understand that health outcomes are very different in different parts of their geographical areas and their strategic and operational planning aims to impact on these inequalities. Front-line staff know many factors can impact on children and their families. These include aspects such as a poor start in life, parents who have experienced problems of stress, social exclusion, unemployment, addiction and poverty themselves, lack of ambition and expectation, poor housing, and difficulties in accessing services due to poor transportation links.

Children's services are crucial, not only for the well-being and safety of children and young people, but they also contribute to the economic well-being of the area, the physical environment, the sports and cultural opportunities available. They have a leadership role in the development and implementation of integrated early intervention and preventative support, as well as targeted support, through the implementation of the common assessment framework and lead professional role, pulling together different agencies for the early identification of needs and provision to meet those needs. Fundamental in children's services is providing top-quality opportunities for children and young people who are looked after by the local authority, often some of the most vulnerable and with the worst health outcomes.

Children's services workers provide some of the most crucial services which contribute to reducing health inequalities. They plan, manage and deliver services in Sure Start Centres to children aged up to five and their parents. Some examples of Sure Start activities include regular facilitated days out for families who have struggled with domestic violence, drug and alcohol misuse and family breakdown. This creates an opportunity for parents and children to have time together doing fun things in a safe and managed environment. Other activities include a healthy eating/ cookery club for parents, culminating in a social event for the children where parents do all the catering.

Children's centres and CAB in Halton – tackling poverty

Halton's children's centres have a contract with Halton Citizens' Advice Bureau to provide services to parents with young children. Families with young children receive fast-track support, and are usually contacted within three hours of referral. Parents are allocated a named adviser to guarantee continuity of service, and an award winning secure online referral system is used to track parents through the service. A home visit is offered to new parents referred to the service. This enables advisers to carry out a financial health check in addition to addressing any specific issues. CAB and children's centre staff work very closely together, attend joint meetings, and address families' needs in partnership where required.

In a period of nine months the service secured £179,000 in new benefits for parents, and helped manage £223,000 of debts.

Children's centres support the most vulnerable and youngest parents not only in bringing up their child but also to develop themselves through providing access to training and employment advice and opportunities and thereby improving their quality of life and standard of living overall.

Children's centres, health and housing in London

In Tower Hamlets, the local authority housing and children's services and the PCT have jointly funded a 'temporary accommodation outreach team' working out of local children's centres. The team identifies any issues a family in temporary accommodation might have, provides support with housing issues and signposts to children's centres and all other local services.

Using children's centre capital funding, Harrow's early years service has refurbished the communal area of a temporary accommodation family hostel, bringing early years services direct to marginalised families.

Enfield's Temporary Accommodation Play Project (ETAPP) is funded by children's services to ensure that homeless children can access appropriate play and activity services, and that parents receive support, advice and information that help them.

We know that educational outcomes and consequent further education and employment opportunities, leading to enhanced quality of life are among the most important

determinants of health in later life. Local authorities are committed to school improvement and work with partners in central government and with other agencies to drive up improvement and educational outcomes for children.

Extended schools services provide a core offer of activities, advice and opportunities including healthy school meals and healthy vending strategies as well as travel-to-school schemes (encouraging safe walking and cycling) and active play projects. The new Extended Services Disadvantage Subsidy from central government is intended to support those children and families who are most disadvantaged, particularly those living in poverty or in the looked after system. The 'Healthy Schools' initiative is a key part of addressing health issues, with healthy schools teams providing consultancy to schools on key areas such as substance misuse, healthy lifestyles, and relationships.

Youth on Health in Leeds

In Leeds, the local healthy schools team has set up Youth on Health (YOH). It is a participatory health forum that involves local young people aged 8 to 17. Every half term, each YOH group meets to discuss different health-related issues that concern and affect today's young people in a fun and creative way. They then feed ideas back into their own school council to help it become more innovative in tackling health issues at school.

Some of the ideas implemented in schools across Leeds as a result of the YOH initiative include:

- introducing a supermarket-type salad bar into the school canteen
- replacing sixth form vending machines with healthier options
- introducing fair trade goods
- free drinking water throughout school
- challenging smoking around school
- improving school councils
- introducing peer mediators.

Giving children and young people a voice is a key part of the 'whole school approach', which the National Healthy Schools Programme promotes.

Recent research from one northern city indicated that one in seven young people not in education, training or employment (NEET) over a long term died within 10 years of falling out of the system. This shocking statistic emphasises the importance of the contribution children's

services will make to the new responsibilities which are due to be transferred to local authorities in 2010 for commissioning, funding and in some cases providing educational opportunities for 16 to 19 year olds. People working with young people at risk of offending or involved in the youth criminal justice system – as well as those who have encountered difficulties in the school system – will continue to improve outcomes for young people at present not in education, employment or training.

Improving young people's life chances in Manchester

- Young people with learning difficulties and disabilities are twice as likely to be out of education, employment or training as those without.
- Young men who have been NEET for more than 6 months are three times more likely than their cohort to have depression.
- Young people with a history of mental illness, and those who misuse drugs and alcohol, are all over-represented among NEETs.

Manchester City Council decided to give a high priority to reducing the number of NEET young people because of the negative impact on the city's economic development and social cohesion and on the life chances and well-being of the individual young people. In just four years, the partnership of agencies has halved the number of young people described as NEET. This has been done through detailed geographical research of the incidence and nature of the NEET group, by recruiting a dedicated NEET co-ordinator, and developing a multi-agency NEET programme as part of their children's board. By aligning funding from a number of sources and through joint commissioning including children's services, a range of NEET engagement and aspiration-raising activities has been undertaken with young people, and specifically the five secondary schools that produce the highest number of NEET pupils.

Adult social care

Social services are currently going through a process of transformation, increasing their emphasis on preventive services and 'personalisation': that is, services which are designed around the needs of individuals. One of the results of these changes ought to be improved health and a reduction in health inequalities. The prevention and personalisation agenda, if it works as intended, should mean that:

- people are supported to live more independent lives for longer, because there is a range of housing suited to their needs
- they have access to social care before their needs turn into medical care,
- personal social care is designed around the specific needs of the most deprived groups of people
- close working between social services, other local authority services and other public services enables holistic support for the most vulnerable people, thereby increasing their overall well-being.

Most people who are entitled to free social services are hugely socially and economically disadvantaged – indeed in many cases this is what makes them eligible for social care and support. This means that if local authorities can help improve the health of users of social services they will not only be doubly helping some of their most deprived residents, but also reducing health inequalities.

Bywaters (2009) and others have identified a number of ways in which social services can address health issues while carrying out their explicit primary function of social care.

- They can reach out to and find the people in greatest need and connect them to resources and services. In a simple example, by working with housing colleagues they can identify people living with fuel poverty, not only supporting their personal care needs but also enabling them to improve their homes by insulation and heating.
- Increasingly they are doing this by making use of the skills and experience of service users themselves – for example by engaging older people as 'wayfinders' to point the way to sources of support for others in their communities. This also addresses issues of loneliness and isolation.
- They can help disabled people to remain independent by ensuring that they are aware of sources of financial and practical support, including support from voluntary sector agencies, and by enabling them to receive direct payments to commission their care. This also contributes

to their overall self-esteem and well-being, improving their living conditions and therefore their physical health.

- They can help reduce the stigma associated with mental ill-health, for example among people in ethnic minority communities. This was illustrated by the 'Mosaics of Meaning' project in Glasgow, using a series of 'community conversations' about mental illness, which included health and social care practitioners.
- They can help people avoid hospital admission by identifying and meeting their personal care needs before they turn into medical needs.

Hammersmith and Fulham: a holistic approach to well-being

The London Borough of Hammersmith and Fulham is characterised by high population density, ethnic diversity, high mobility, and a very wide range of economic circumstances. The Director of Community Services has responsibility for housing, adult social care, community safety, community liaison, regeneration and adult education, thus enabling social care to integrate approaches to a number of social determinants of health. An example of where 'place shaping' and personalisation connect in community services, which works jointly with the NHS, is the corporate Better Government programme which includes older people and younger disabled people. The function of the programme is to influence services and decisions made in the borough which may impact on older people or disabled people, and to ensure that those services and decisions have taken into account the needs, wishes and aspirations of disabled and older people. As well as changing how older and disabled people are perceived within the borough, the programme has also established a programme for over 50s, including work to prevent becoming ill and dependent on health and social services. Outcomes are measured in terms of numbers of people involved in the programme, the kind of topics and areas of work that have been engaged with the programme, and levels of satisfaction by users of services.

The new prevention agenda has set in train a number of very imaginative pilot projects, including the Department of Health's Partnerships for Older People Projects (POPPs), and Linkage Plus (interestingly funded by the Department of Work and Pensions), another initiative involving older people. These show that – with investment of time and resources – the active engagement of older people in design and delivery of social services; taking a holistic approach; and recognising the interrelatedness of

people's financial, housing, social and health needs can really transform lives. The challenge will be the wider implementation of the prevention and personalisation agendas in adult social services so that they have this kind of positive impact. They should not become a means of transferring responsibility for service users' health and social well-being to service users themselves, without improving what Marmot calls "the conditions for flourishing".

Ageing well in Dorset

With the highest proportion of older people in the country, Dorset County Council has used its Partnership for Older People Project (POPP) to develop a network of sustainable local support services designed to:

- respond to the needs of the increasing number of older people
- reach and support people before they develop critical care needs
- play a leading role in helping older people to lead full and active lives.

The partnership is unusual in the extent to which it delivers preventative and health promotion services by using the capacity and skills of older people themselves. Older people are trained as wayfinders and paid to provide information, signposting and support to individuals, and as community leaders, paid to identify community needs and develop strategies to meet them.

Older people also take the lead in allocating funding to community projects. Fifteen older people have also been trained as voluntary evaluators and have undertaken the qualitative evaluation which has been an important aspect of the programme.

Planning and transport

There is an important link between how places are planned and developed and the health of the communities who live in them. This link is increasingly recognised in planning guidance and in how planners think about their work.

Each area's local development framework (LDF) – the overall delivery plan for the council - takes account of broader social, economic and environmental factors. Changes to the physical environment of communities are planned so that the physical infrastructure facilitates the conditions and the lifestyles that lead to well-being.

To achieve this, those responsible for planning within local authorities recognise that they need to work across the board in better partnership with others delivering public services. They need to understand more about the needs of communities and to make better use of the expertise of other public service specialists. In terms of health, looking at the social determinants, carrying out health impact assessments as well as environmental and sustainability assessments allows us to look at how interacting with the place affects people's well-being and health. Looking at the social determinants of health puts the focus on the community rather than simply what the land is used for.

By working with others to understand these issues, planning can help to ensure that the new development - the housing types, layout, density, and linkages to facilities, open space, employment and public services – will be more likely to improve the life chances for residents.

South Tyneside Local Strategic Partnership: linking the local development plan to wider social and economic objectives

The South Tyneside Local Development Framework (LDF) shows how the integration of physical planning with economic and social regeneration strategies can enhance the impact of both. Like many former industrial centres, South Tyneside displays many of the usual indicators of disadvantage: high crime and anti-social behaviour, poor health indicators and low educational achievement.

In tandem with the sustainable community strategy, the regeneration strategy focuses on a programme of investment – in schools, business parks, health centres, transport, housing, town centres, the riverside and the environment.

As part of the process of developing the LDF, the development team listed all the objectives in the community strategy. Using a traffic light system, it identified those with land use or other physical

development implications. This included many of the interventions identified in the regeneration strategy. Consultation with the public involved a range of techniques and capacity-building activities.

The physical development continues to address economic, social and cohesion objectives, as the council believes that developments that exclude sectors of the community place themselves at an immediate disadvantage in terms of either their long-term sustainability or their ability to be accepted by the whole community. In a similar spirit, the borough's spatial vision for the area sets out the aim that "all those within the borough can access the opportunities that are available, with reliable public transport, efficient road network and above all, focusing on delivering accessibility rather than relying on mobility."

If we are planning for health we have to think about transport at the same time – a link that has not always been made in the past. Transport is a derived demand. Its primary function is in enabling access to people, goods and services.

Transport has major health impacts – through road accidents, levels of physical activity undertaken and the associated health threat from weight gain, effects on air pollution, and access to a range of services. The adverse health effects fall disproportionately on the most vulnerable groups in our societies, generally those living in poorer communities who suffer from more obesogenic environments which discourage active travel and active play, and who experience more accidents.

Increasing opportunities for non-and low carbon transport are once again an imperative for long-term survival and quality of life.

Retaining high land use densities, a greater mixture of land uses, a balance between housing and jobs, grid street networks, and the presence of separated facilities for bicycles and pedestrians have all been shown to increase walking and cycling (Active Community Environments, undated).

Those living in walkable neighbourhoods are more likely to know their neighbours, participate politically, trust others, and be socially engaged (Leyden 2005). 'Walkability' cannot be planned for without a co-ordinated approach to the built environment as a whole, bringing together housing, transport and the planning system. This is just one illustration of why an integrated approach is necessary to embed health considerations.

Accident prevention in Hampshire

Cut your speed to 30 miles an hour in villages

That was the message to motorists in Hampshire

County Council's 'Choose 30' campaign. The campaign coincided with the introduction of the first wave of 'Village 30' - an ongoing programme to reduce speed limits in all Hampshire villages to 30 mph. 43 villages across the county had their speed limits cut in autumn 2008 and a further 61 villages followed suit in the second wave of the initiative in spring 2009.

'Choose 30' included bus-back advertising, public message broadcasts on local commercial radio, and branded beer mats and sandwich bags.

Smarter travel in Sutton

Smarter Travel Sutton (STS) is London's first sustainable travel behaviour change programme. A partnership between Transport for London and the London Borough of Sutton, it was launched in September 2006 and ran until September 2009. The main aims of the programme was to reduce congestion and the environmental impact of travel by car in Sutton by boosting levels of walking, cycling and public transport use. The programme's first year focused activity on school and workplace travel plans, personal travel advice and campaigns to raise awareness of the benefits of walking, cycling and using public transport. Year two was designed to begin to change behaviour. During the second year, messages about the health benefits associated with walking and cycling were targeted at those likely to be receptive, such as gym members and the parents of school-age children. The third year of the programme sought to reinforce these messages to ensure that behavioural change is maintained. It also included planning to 'mainstream' the initiative within the council.

By the second anniversary of the programme, bus use and cycling levels had grown and there had been a significant reduction in the use of the car for travel to school.

Housing

Local authorities have always had links with housing and, until the 1980s were major builders of social housing. The 'Right to Buy' initiative and the various restrictions introduced at the same time on local authority investment of capital receipts from the sale of council houses, meant the sale of nearly two million homes from the social housing stock and their house building and maintenance programmes almost ground to a halt. Their previous role in the supply of social housing has, to a great extent, now been taken over by housing associations. But a shrinking social housing sector no longer provides housing for a broad cross section of the community and has become characterised by deprivation and social exclusion. Housing is worst at the poorest end of the private rented sector, so there is overwhelming pressure on social housing. In England in 2008 there were 1,770,116 households on waiting lists – 8.2 per cent of total households in the country. In Newham it is 30 per cent of households, in Sheffield it is 40 per cent. The overcrowding problem is worsening and is most acute in central London, with more than 60 per cent of children in the borough of Tower Hamlets living in overcrowded conditions. Under-investment in social housing has been recognised as a major problem and local authorities are now being given greater freedoms to begin building programmes, although these are very small indeed compared to the need and the level of overcrowding.

As with most of the social determinants of health, the quality of people's homes is strongly related to income. Minimising the adverse affects of poor housing remains a major challenge for local government and other agencies. In the most obvious way, damp, cold and overcrowded conditions can lead directly to physical illness. But there is also increasing evidence that poor housing conditions can also seriously affect people's mental health and sense of well-being. The British Medical Association (BMA) has concluded that multiple housing deprivation appears to pose a health risk that is of the same magnitude as smoking. And the housing charity Shelter has found links between overcrowded family housing and depression, anxiety, sleep problems and strained relationships.

Despite the diminution of their role as landlords, local authorities retain a number of important recently-strengthened strategic roles in relation to housing. As part of the sustainable community strategy for their area, they develop local housing strategies. Housing strategies are now more closely linked to environmental and transport planning and to a general approach to the 'liveability' of an area, and are often informed by health impact assessments. In theory, this involves assessing needs, determining local

priorities and planning how the need for good quality affordable housing can be met. In practice, the statistics quoted above indicate that local authorities' housing strategies are not currently backed up by the resources and powers to address needs. Nonetheless, local government's strategic role in housing could be an essential tool in shaping the places in which people live.

Local authorities also have a number of other strategies and duties in place to provide a framework for their housing activities. These include their homelessness strategies - which have done much to reduce and mitigate the effects of homelessness, especially on children; their duty to provide accommodation for certain categories of homeless people; and their strategies in relation to ensuring housing provision for vulnerable people, including those entitled to social services. They also have a general duty to ensure that all homes are fit and safe to live in. This duty is most exercised in relation to the private rented sector, especially to houses in multiple occupation, which tend to have the lowest fitness standards and the greatest overcrowding.

The role of housing becomes pivotal where services to an individual with complex long-term needs are involved. People with health problems are disproportionately likely to occupy the least health-promoting segments of the housing stock, a factor that is likely to exacerbate their health problems. People with mental health problems are disproportionately represented among those who are homeless.

Tackling overcrowding in Tower Hamlets

The London Borough of Tower Hamlets (LBTH) is one of the worst areas in the country for overcrowded housing with one of the highest rates of tuberculosis. There are high rates of overcrowding among lone parents and large households, and in the black and minority ethnic (BME) community. One of the strands of the council's housing strategy is to increase the overall supply of housing, including affordable family housing. It plans to do this by:

- an initial pilot to build 61 units of family-sized housing with a preferred development partner on small plots of council land. This will increase as more sites are identified.
- new council housing – the council plans to start its own house building programme to build 17 units, housing 86 people over five sites on three LBTH estates.
- buying back ex-council three-bed plus 'right-to-buy' properties – around 100 are planned.
- increasing housing supply by at least 9,000 units by

2012.

- tackling under-occupation through incentivisation and a package of support to increase social housing stock.
- promoting low cost home ownership products to overcrowded households.
- re-housing 19 Gypsy and Traveller families and seeking additional pitches on a new site.

Some of the most effective support by local authorities includes what are called 'low level interventions', such as handyman schemes to help older people with DIY tasks and gardening. Tasks which may seem small are often what can make or break someone's ability to go on living in their own home. It is important that government and councils recognise the significant difference that this work can make and finds means to invest in it. Work on housing strategy, low-level interventions and general liveability is an area which provides great scope for partnerships, for example with PCTs, housing associations and other voluntary sector organisations. A strategic, multi-faceted approach is needed and there is evidence that such an approach can produce returns in the numbers of people living safely and well at home, and in reduced hospital stays.

Environmental services

Environmental health is one of the most longstanding and obvious local government functions with a health impact. Nowadays local authorities' environmental services include not only environmental health but also street services, such as cleaning and litter collection, waste collection and recycling, green space management, air quality, and issues arising from climate change. In fact, they cover a significant part of what we now class under the headings of sustainability and quality of life.

Waste and recycling services are one of the most visible services that councils run. As well as simply collecting the bins, councils carry out an enormous amount of work to reduce waste, recycle, and encourage others to recycle and manage waste sustainably.

Waste management in Preston

Preston City Council works with multiple-occupancy buildings to tackle waste generated by the residents of such properties. The overall aim is to provide an alternating weekly material recycling and refuse collection service to all multiple-occupancy buildings throughout the city by focusing on the needs of each individual property and providing individual solutions. Through site visits and discussions with residents, wardens, management companies and developers, the council makes changes that take into account residents' capabilities, space available, building layout and any other operational considerations.

Solutions include recycling sites incorporating communal, lockable bins; communal 240 litre wheeled bins or blue boxes stored in convenient council-agreed locations; and recycling bins labelled to meet specific language needs, for example in Polish and Chinese.

Clean air is a basic requirement of life. Air pollution caused by human activities can have adverse impacts on our health, our physical enjoyment and aesthetic appreciation of our surroundings, the health of the living environment, and the integrity and appearance of materials and the built environment. As such, the work of local government in monitoring and improving air quality is essential to health and well-being. Local authorities are required to draw up plans to show how they are working towards the national air quality objectives. They have to review and assess air quality within their boundaries and designate air quality management areas (AQMAs) and draw up action plans where air quality is poor and action is needed.

Community Airwatch in Sefton

Since 1996 Sefton Metropolitan Borough Council has operated 'community airwatch', a programme in which residents are supplied with diffusion tubes to monitor nitrogen dioxide levels at their properties. Hands-on activities are used to promote the air quality message – for example, testing exhaust emissions of councillors' cars. The air quality service works in partnership with the PCT to disseminate air quality messages and basic health advice to local media, schools, GPs, respiratory health nurses and councillors. The council has also worked closely with Liverpool University, in particular the Centre for Intelligent Measurement Systems.

Councils recognise that although they now play a significant role in improving air quality, there is still a need for much greater integration with transport policy and planning, both local and nationally. Only through such integration can they hope to make a positive contribution to the even greater issue of climate change.

Climate change will have significant health and health equality implications. In the UK, the positive health impacts of climate change, such as a reduction in cold-related deaths, are likely to be outweighed by negative impacts such as an increase in heat-related deaths, increased cases of skin cancer and cataracts, injuries and infectious diseases caused by flooding, anxiety and depression from physical and economic insecurity and increased respiratory disease, insect-borne disease and food poisoning. Poorer social groups are likely to be more exposed to these risks and suffer more serious health impacts as a result.

The 2006 Local Government White Paper, *Strong and Prosperous Communities*, highlighted the importance of climate change as an issue that local authorities should focus on. As well as tackling air quality in the general environment, councils are expected to sign the Nottingham Declaration on Climate Change and commit to action to reduce the council's own emissions. In addition, councils can influence emissions reductions more generally through their own local procurement and operations.

Middlesbrough Council – tackling climate change

Middlesbrough Council is a Beacon Council for tackling climate change, in recognition of the way it works with partners in all parts of the community to mitigate and reduce the impacts of climate change. Middlesbrough's climate change community action plan provides a clear, documented vision for a low-carbon and well-adapted

area and this commitment is mirrored within key council strategies. The council is achieving an annual 1 per cent reduction in CO₂ emissions and its approach has been adopted by partners in the Tees Valley. Middlesbrough has made a priority of engaging with householders and communities and has taken steps to protect communities most at risk from the impacts of climate change, including the 'heatwave' plan for vulnerable elderly people.

The environmental aspects of sustainable community strategies developed by local authorities and their partners are now likely to include provision for increased 'walkability' and access to green space, allotments, city farms and community gardens; provision to tackle environmental inequalities such as inequalities in access to fresh food and air quality; improvements in waste disposal and energy management; and action to mitigate climate change.

All of the above reflect the social determinants of health and the concentric circles of widening health impact

Culture and sport

As individuals we probably all understand the health benefits of culture and sport. When we watch our children at play rather than sitting in front of the TV or computer; when we come to the end of an exhilarating game of squash; when the day's stress dissipates at the end of a good play or a night at the comedy club; when the doctor tells us our blood pressure is too high and we realise we need to walk and exercise more.

Culture and sport not only alleviate both physical and mental health problems but they are major contributors to the prevention agenda. Getting and keeping people fit and healthy has huge 'upstream' benefits particularly for an increasingly older community.

"The scientific evidence is compelling. Physical activity not only contributes to well-being, but is also essential for good health. People who are physically active reduce their risk of developing major chronic diseases by up to 50 per cent, and the risk of premature death by about 20-30 per cent".
(Chief Medical Officer, Department of Health, 2004)

Evidence from the 2005/06 Active People Survey shows that just over half of the population, 20.6 million people, do not participate in sport and active recreation at all – a matter of concern in light of the obesity epidemic and the need to engage in physical activity to reduce heart attacks, stroke and other life- and quality-of-life threatening conditions. Regular involvement in sport and physical activity also helps to create a healthier workforce.

Many local authorities have now established sport and physical activity networks or alliances. These will be important partners in ensuring that the delivery of sport and physical activity can be coordinated locally, particularly for those areas which have included objectives under National Indicator 8 (adult participation in sport) in their LAA. Many councils like Wigan are being commissioned by the PCT to help tackle obesity and improve physical activity.

Get in Shape in Wigan

SHAPE (Sport, Health And Physical Education) is the name of Wigan Borough's five year action plan to get local residents involved in regular physical activity or sport. The plan was developed in partnership with Wigan Council, Ashton Leigh and Wigan Primary Care Trust, the Wigan Borough Sports Council, Wigan Leisure and Culture Trust and other partners in the private and voluntary sectors. Because SHAPE reflects the contribution of partner organisations, programmes will run across a broad range of organisations and will

affect many aspects of peoples' lives. For example, future planning and regeneration will focus on improving the built environment and leisure facilities, with cycle lanes, better maintained parks and new sporting facilities. Some of the programmes include:

- **Steps to Health** – physical activity referral scheme working in partnership with local Health Services.
- **Next Steps** – encouraging sedentary people to become more active.
- **Stepping Out** – working with Wigan Partnerships for Older People Project, aimed at providing older people with opportunities to increase physical activity.
- **Al Fresco** – using the great outdoors to encourage all ages and abilities to become more physically active. Projects include, Dark Horse, orienteering, Tai Chi, golf and bowling sessions.
- **Food and Physical Activity** – working with SureStart and the PCT, the project aims to provide healthy eating and physical activity opportunities for parents and carers and 0-5 year olds.
- **Bridge Builders** – working with mental health services and support agencies to raise awareness and increase participation among mental health service users.
- **Let's Get Active** – to provide physical activity and leisure opportunities for adults who have a learning disability.
- **Well@Work** – improving health and well-being in the workplace.
- **On Yer Bike** – working with cycle projects and the PCT to help adults get back into cycling in a safe, fun and healthy way.

Participation in sport, physical activity and art can also have a beneficial effect on mental health, and relate to an improved sense of well-being and self-esteem. There are many examples of this, from the use of music to help people with dementia to the use of local history to engage individuals and communities. Disability sport has also grown significantly up to Olympic recognition including the Special Olympics for people with learning difficulties.

Bronchial boogie beats asthma in Oldham

In a partnership between Oldham's NHS and council music service, young people of seven to eleven with asthma meet weekly for wind instrument lessons, breathing exercises, games and a nurse-led asthma clinic. After 4 years, the award-winning project has shown significant improvements in young people's respiratory

health (and musical ability)!

Bronchial Boogie Clubs meet weekly. When the children arrive they are given a drink of fruit juice and a small snack, usually fruit. A half-hour wind instrument lesson which includes breathing exercises and games is followed by a half-hour meeting with the nurses when the children's respiratory health is monitored and recorded, problems addressed and health education provided through quizzes and games. Results show a significant improvement in respiratory health:

- a 70 per cent decrease in night symptoms
- a 58 per cent decrease in day symptoms
- symptoms experienced during exercise decreased by 54 per cent.

Once in hospital or care, culture and sport can also play their part. Studies have shown that participation in arts activities, or being placed in a well-designed environment, can reduced stress levels, improve mood, create distraction from medical problems, lead to reduction in medication and aid quicker recovery.

Simple steps to improving well-being: potential for local government leisure, sport and cultural services

The Foresight report on mental capital and well-being has developed a simple concept based on the 'five a day' principle for eating fruit and vegetables. The report concluded that five simple steps incorporated into daily life can fortify mental health and can contribute to a more productive and fulfilling life:

Connect

Developing relationships with family, friends, colleagues and neighbours will enrich your life and bring you support.

Be active

Sports, hobbies such as gardening or dancing, or just a daily stroll will make you feel good and maintain mobility and fitness.

Be curious

Noting the beauty of everyday moments, as well as the unusual, and reflecting on them helps you to appreciate what matters to you.

Learn

Fixing a bike, learning an instrument, cooking – the challenge and satisfaction brings fun and confidence.

Give

Helping friends and strangers link your happiness to a wider community and is very rewarding.

This 'Five a day' campaign provides major opportunities for local government to make a contribution, from improving the aesthetic aspects of parks and green and open spaces, to enhancing sports facilities and creating new opportunities for residents to engage actively with their environments and their communities.

Work, worklessness and the local economy

At any one time around three per cent of the working-age population is off work due to illness or incapacity, costing the economy over £100bn per year (Black 2008). Almost four out of 10 adults with mental health conditions are unemployed, which represents a loss to the economy of £9.4bn. This is considerably higher than the £6.5bn spent by the NHS on mental health services in 2008. There is overwhelming evidence that being in work is a key component of mental and physical well-being.

Some 2.64 million people currently claim incapacity benefit and many of these would like to work. But if health inequalities are to be addressed it means helping all those unemployed into a job that takes them out of poverty so they are not trapped in unemployment or poverty wages which will affect their future health. There are a range of measures that local authorities can take to support people in and into work, and to support those who are unable to work or to find work. These include:

- Their environmental health and safety work to reduce deaths. Around 200 people are killed through work-related incidents every year and 5,000 to 6,000 people die as a result of exposure to materials at work.
- Acting as a role model of a 'healthy employer' and supporting other employers to tackle health inequalities by taking action to develop a healthy workforce.
- Helping people into work by:
 - putting employment advisors in GP clinics
 - encouraging employers to offer work placements and to reduce prejudice about employing people with health problems
 - specialist support and mentoring for people with health problems in work
 - intermediate labour market schemes and schemes under the Future Jobs Fund
 - providing opportunities through the council's own role as an employer
 - skills training so that people don't get trapped in low pay/no pay cycles.

Local authorities' work to support and boost their local economies is one of their less well known activities among the general public. However, for a considerable time now, they have been playing an active part in regenerating communities, promoting their areas to attract inward investment, developing training opportunities to help people improve their

employment opportunities and supporting those who are out of work, for example with welfare benefits advice.

Aawaz: Hyndburn Borough Council

Aawaz was established in 1999 to support, encourage and motivate British Asian women to engage with and access health, education and employment services. Most participants are of Pakistani or Kashmiri origin. Hyndburn Borough Council runs the project in partnership with the local PCT and GPs.

On offer are language and lifestyle sessions, normally attended by 15 to 20 women. These give women with very little understanding of English the chance to practise speaking the language.

The sessions also give advice about the culture of the Lancashire borough, including tips on how to talk in shops, interact with neighbours, book GP appointments and deal with schools.

Women have access to mental health sessions to help them cope with feelings of depression and isolation. Information is also given on keep-fit classes, guided walks and pregnancy support schemes. The project's medical adviser is on hand to deal with any health issues. Women who are pregnant and struggling with the language can be accompanied by an outreach worker to antenatal hospital appointments if they wish.

In the current economic climate, many local authorities have redoubled their efforts in this area, working with local partners to try to enhance their communities' abilities to withstand the recession, and developing programmes under the general heading of 'resilience'.

Some of the actions local authorities have been taking include:

- Supporting people in housing difficulty, including supporting new forms of intermediate housing tenure (part owned, part rented), flexibility in pursuing rent arrears, encouraging housing benefit take-up
- Promoting access to finance through debt counselling services and credit unions
- Tackling unemployment and developing skills, including short intensive adult education courses to assist in re-skilling, council apprenticeship schemes, priority to unemployed people when recruiting
- Supporting communities by maintaining flexibility and transfer between budgets and funding streams to help those most in need and allocating resources to areas of increase in service need, for example benefits and

housing advice, money advice surgeries; supporting Citizens Advice Bureaux and the voluntary sector

- Supporting small businesses by encouraging rate relief take-up, developing financial packages with regional development agencies to help those in short-term financial difficulties, paying bills on time, using their purchasing power to support local small businesses
- Investing in regenerating areas with high unemployment so that more jobs are created.

Local authorities who wish to tackle health inequalities by getting those with physical or mental health problems into work need to ensure that they are facilitating and empowering their citizens by the kind of action listed above, rather than creating further stress and widening inequalities through their actions. This means helping those without a job into work that takes them out of poverty, so they are not trapped in unemployment or earning poverty wages which will affect their future health.

Better health and work

Sheffield Health and Work Strategy Group is made up of representatives from the voluntary sector, NHS, council and service users who collaborate to improve health and well-being. They develop local networks, using a holistic approach to service delivery, to help people who are in work and at risk of losing their job; those off sick; and people who are out of work and have aspirations to get back into work.

Healthy Workplaces MK, a free service from the Health and Safety Executive (HSE) and Milton Keynes Council, gives confidential, practical advice to small businesses. It provides basic advice and guidance on workplace health and safety, managing sickness absence, and return to work issues.

Leeds Mental Health Employment Consortium is a city-wide, multi-agency group, which is co-ordinated by MIND. It works to address the barriers to work faced by those with mental health problems. It has developed a vocational action plan that has been delivered over the last three years.

References and further reading

Children's services

Social and emotional well-being in primary education - guidance from the National Institute of Health and Clinical Excellence (NICE): www.nice.org.uk/guidance/index.jsp?action=byID&o=11948

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Department of Work and Pensions website on Linkage Plus: www.dwp.gov.uk/policy/ageing-society/resources-good-practice-reports/linkage-plus/

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Environmental services

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Communities and Local Government, *Councillors' Guide to Creating Quality Public Spaces*: www.communities.gov.uk/publications/communities/qualitypublicspacesguide

The Sustainable Development Commission's Healthy Futures work programme examines the links between health and sustainable development

The Environment Agency provides resources on the links between the environment and health.

The National Institute for Clinical Excellence and Health (NICE) has published guidelines on physical activity and the environment, which examines how to improve the physical environment in order to encourage physical activity.

Building Health: What needs to be done? is a collection of papers by leading experts and campaigners which examine how the design of towns, cities and buildings might encourage physical activity.

Sustaining a Healthy Future: taking action on climate change sets out how the public health community, the NHS, local authorities, the voluntary sector and others can take action to create a healthy, sustainable and low-carbon future.

Culture and sport

Shaping places through sport www.sportengland.org/support__advice/local_government/shaping_places.aspx

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IDeA collection of case studies on the ways that local authorities across the country are responding to the economic downturn: www.idea.gov.uk/idk/core/page.do?pagelD=9487775