

# Creating a Healthy Community

## Conference Report



Photo of chair and speakers at the event

**Organised By:  
The HEALTH IN YOUR ENVIRONMENT  
VOLUNTARY SECTOR FORUM (HIYE)**

**On 25<sup>th</sup> October & 20<sup>th</sup> November 2002  
at Nottingham and Notts Society for the Deaf**

## Conference Aims

To develop a vision of what we understand to be a healthy community for Nottingham.

To identify what principles underpin the achievement of a Healthy Community now and in the future.

To develop new and innovative ways of achieving that vision.

## Acknowledgements

HIYE wishes to acknowledge and thank the following that enabled this conference to take place:

- Financial support from City South East Primary Care Group and the Nottingham Health Action Group's Health Initiatives Budget
- Our facilitator, Christopher Cooke, for the planning and preparation.
- The speakers:
  - Alan Simpson MP
  - Dr Michael Varnam
  - Gary Smerdon-White
  - Ann Goodwin
  - Stan Crawford
  - Eleanor Dodd
- The HIYE planning group, Nottingham Health Action Group and Networking Action with Voluntary Organisations in undertaking the planning, co-ordination and administration for the conference.
- All those who contributed by participating.

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## Executive Summary

A conference on Creating a Healthy Community took place on 25<sup>th</sup> October 2002 at the Nottingham and Notts Society for the Deaf on Forest Road, Nottingham. There was a follow up half day held on 20<sup>th</sup> November. The Conference was aimed at the voluntary and community sector, though there were representatives from the statutory sector present.

In the morning of 25<sup>th</sup> October there were a variety of speakers who provided a range of inputs looking at their vision for a healthy community.

Richard Eddleston, Chair of HIYE, chaired the morning session.

Ann Goodwin (The Public Health Perspective), from the East Midlands Government Office, spoke about strategic investment in health being a means, not an end; about empowering local people to become the engines of public health; about empowerment bringing discomfort-but nothing worthwhile is ever easy; and about action to improve health and reduce health inequalities must start with those whose needs are greatest.

Alan Simpson MP spoke about the need to value self and others; about collective beliefs and motivation producing sound local decisions; about the need to strengthen the locality and local accountability; about the threat posed by the loss of healthy infrastructure (parks, sports fields, etc); about the degradation of work and workers and the loss of self-value this brings; about who defines health, public bodies or society, as well as the role of nutritional supplements; and about the need to create different interfaces between the producers and consumers of services in society.

Gary Smerdon-White (The Business Perspective), chair of the Environment Strategy Action Team for Nottingham Sub-Regional Strategic Partnership, spoke about the fact that business wants healthy workers; about the rise of the 'caring' organisation; about how demographic pressures, such as a falling workforce, shape work patterns; about how partnerships between business and health promotion must be a social priority; about how ethical factors must develop as modifiers of business activity; and about the need for a better work-life balance with greater flexibility.

Stan Crawford (The Community Perspective), from the Sherwood Energy Centre, spoke about how a community strategy has, ideally, the environment at its core; about how fuel wealth and poverty should be managed as a key social element of a community strategy; about open spaces being an essential part of a community strategy; about how knowledge and information should be freely available and promoted; about how environmentally friendly access and travel need to be encouraged; and about how using local suppliers, products and skills has a ripple effect outwards.

Dr Michael Varnam (The Health Development Agency Perspective), spoke about poverty as a primary challenge; about partnership as an action based relationship; about a multi-agency approach being essential to an overall consciousness of community planning; about understanding the inter-connectedness of problems

contributing to their solution; about the principle of sharing power being central to progress; and about the need to mainstream what works.

Eleanor Dodd from the Woodcraft Folk (The Young Person's Voice), one of a group of young people who attended the recent Johannesburg Summit as part of the Civil Society Forum, the non-governmental part of the WSSD, in which she and the other members of 'major groups' were involved. Eleanor spoke about the importance of involving young people in decision making; about the overpowering imperative of sustainability; and about the importance of engaging with civil society. She spoke about the importance of the partnerships that were created there in terms of putting sustainability into action.

The conference facilitator Christopher Cooke led the afternoon session. During this session, drawing on the speakers' input and drawing on their own experiences, participants were challenged to re-think their basic assumptions about what makes for a healthy community. They were also challenged to look in particular at what the barriers were to change.

Christopher introduced the concept of Spiral Dynamics as a way of moving forwards and creating change in society. This included the six conditions for systemic change to more complex thinking.

The follow-up half day was a session that set out to move participants from knowledge into action. They looked at what new ways of working and what new ways of thinking were required, in order to create a healthier community.

## **The Key Outcomes from the Conference**

The action statements that accompany the key outcomes were not part of the Conference, but have been developed by HIYE members since as a way of moving the key outcomes forward into action

**The Need for a Clear Vision of Where We are Aiming as a Community:** At present there is no clear consensus as to where we are aiming. This is an enormous, yet key, consideration.

Action Statement: HIYE to form a cross sector study group to evolve an underlying philosophy and vision for a healthy community.

**The Need for a Fundamental Re-Think:** At present we tend to have an incremental approach, one that looks at what can be added or subtracted to what exists. We need to think about how we would organise our community if we were starting today from scratch. There is a need for broader, deeper discussion between policy makers, commissioners, providers and consumers.

Action Statement: HIYE to form a cross sector study group to evolve an underlying philosophy and vision for a healthy community.

**The Need for a Holistic View of Health:** There is a need for an integrated approach to health that combines the physical, mental, emotional and spiritual dimensions of a person and of a community. This is an antidote to the dominant view at present, which is one that tends to concentrate on ill-health management.

Action Statement: HIYE to broaden its membership and to become more inclusive.

**The Need to Promote the Spiritual Values of our Community:** Values are the glue that makes our community work.

Action Statement: HIYE supports the development of the Inter Faith Council in bringing together different faiths and enabling them to become more involved in the community network.

**The Need to Support Social Entrepreneurs/Local Champions:** At present the system tends to undermine them as much as support them. We need to provide opportunities for empowerment, through recognition and celebration of small self-valued achievements.

Action Statement: HIYE/NHAG to stage a celebration event to showcase successful HIB (Health Initiatives Budget) projects as examples of best practice.

**The Need for Sustainable Funding for Voluntary Sector Groups:** At present, social entrepreneurs put in much effort to get something up and running and working effectively, only for the finance plug to be pulled and all the good work lost. Short term thinking and funding is damaging rather than constructive.

**The Need to Mainstream What Works:** Otherwise there is a danger that the successes that have been achieved will be lost.

**The Need for Relevant Vital Signs:** Ones that reflect the increasing stress on individuals, on our community, and on our environment. (Levels of chronic ill health, of obesity, of mental ill health, of violent incidents, of obsessive behaviour). We also need positive signs to reflect and celebrate our achievements.

Action Statement: HIYE to run a seminar around the Audit Commission's Quality of Life Indicators. To develop from these indicators that more accurately reflect the quality of life issues and concerns of member groups.

**The Need to Make Use of Best Practice from Around the World:** There is much that we can learn from developing countries.

Action Statement: HIYE to develop links through work related to the Health stream of WEHAB (part of the World Summit for Sustainable Development recommendations).

**The Need to Stress the Importance of Localisation:** This is a counter balance to globalisation. To stress local food production, local purchasing, by individuals and statutory bodies such as hospital and schools, and local sustainable industries.

Action Statement: HIYE to develop a workshop around this theme.

**The Need to Strengthen the Local Social Economy:** There are a whole range of alternatives that are promoted by such groups as The New Economics Forum.

Action Statement: As above. HIYE to support the development of credit unions etc.

**The Need for Stories that Communicate the Heart of our Message:** This is the most effective way of getting our message across to people.

**The Need to increase a Sense of Community Involvement:** Only when people feel a sense of control will they take ownership of the health of their environment and community. A sick society will be reflected in sick individuals. More bottom-up thinking and less top-down prescription.

Action Statement: HIYE to develop a newsletter that improves two-way communication between the voluntary sector and strategic statutory bodies.

**The Need to Support Individuals' Responsibility for Their Own Health:** This is not to promote a culture of individual blame, but to make it an easier choice for someone to opt for the healthier alternative.

Action Statement: HIYE to develop a newsletter and information sheets on relevant topics.

**The Need to Tackle Health Inequalities:** This may well require a much bolder and more fundamental change of approach than is presently being taken.

Action Statement: HIYE to widen its membership to become more inclusive. To promote the links between health inequalities and the environment.

**The Need for Joined-Up Thinking:** Despite the rhetoric, this still has a long way to go before it is fully effective. Different organisations are often still entrenched in their own remits.

**The Need for Meaningful Partnership Between the Voluntary and Statutory Sectors:** Despite all the effort made so far, there is still a long way to travel before this is as effective as it could be. There needs to be a strong culture of 'learning together' between policy makers and communities. Agencies and communities acting together can responsibly share power and take risks.

**The Need for Effective Ways to Challenge Vested Interests:** These are a block to real and meaningful change, particularly professional power.

# Creating a Healthy Community?

## Introduction

### Aim of the Conference

**To develop a vision of what we understand to be a healthy community for Nottingham.**

Thus the task is not so much to see what no one yet has seen, but to think what no one has yet thought about that which everybody sees.

Schopenhaur

**To identify what principles underpin the achievement of a Healthy Community now and in the future.**

Education is the ability to perceive the hidden connections between phenomena.

Vaclav Havel

**To develop new and innovative ways of achieving that vision.**

It is common to hear that people in organisations resist change. In reality, people do not resist change; they resist having change imposed on them.

Fritjof Capra

Following the 10<sup>th</sup> Anniversary of the Rio Summit the Health in Your Environment Voluntary Sector Forum was curious as to what we in Nottingham have achieved in these last 10 years. How could we build upon the successes? What new knowledge existed at this time about what it means to be a healthy community? What vision describes what this might be like for the people of Nottingham?

We were dedicated to helping 'Nottingham' answer these questions, celebrate the successes to date and prepare for what comes next in our increasingly complex world.

On 25<sup>th</sup> October 2002 participants:

- Heard a range of influential speakers talk about how they and their organisations were contributing to a 'Healthy Community';
- Explored the themes in what was presented;
- Made sense of these themes from a fresh perspective;

- Prepared to manage their own enquiry between this event and the follow up session.

At the close of this first event some questions were posed which became the basis for enquiry in the intervening period to the next event.

## **Small Group Work**

Working in small groups, participants came up with a series of statements, which for them spelled out the essentials that go to make up a healthy community. These were based on the morning talks by the speakers and upon the varied experiences of the participants. They provided a solid base with which to move forwards. The list is produced below:

- consists of strong, positive social networks
- is a sustainable community
- and healthy individuals are inevitably linked
- allows and encourages full personal development
- strives to achieve equality and acceptance
- welcomes empowerment and encourages commitment
- enables people to thrive from employment, have access to services and to feel safe and valued
- is improved by active engagement
- is underpinned by true partnerships
- increases and maximises its social capital
- is identified by positive social and linking processes
- can manage diversity successfully
- challenges the culture of contentment
- respects the validity of community testimony
- is actively inclusive
- can manage local power for local needs
- has the capacity to sustain initiatives
- demonstrates an integrated approach to individual and collective well being
- has a high level of social responsibility
- benefits from meaningful, collaborative consultation

## **A Critique for a Better Future**

Building upon the work done to define what a healthy community requires, participants then worked on defining the barriers to achieving this goal. Again working in small groups, they came up with the following barriers to achieving the desired change.

- More bottom up thinking and less top down prescription
- Short term thinking and funding is damaging rather than constructive
- The need for broader, deeper discussion between policy makers, commissioners, providers and consumers
- The need for a strong culture of ‘learning together’ between policy makers and communities
- Working together in communities must mean changing together
- Agencies and communities acting together can responsibly share power and take risks
- A new confidence and new channels are needed to challenge and engage together to achieve a healthy community

These critiques were then used to inform the development of the key objectives, and subsequently the action statements around the key objectives that HIYE members have since developed.

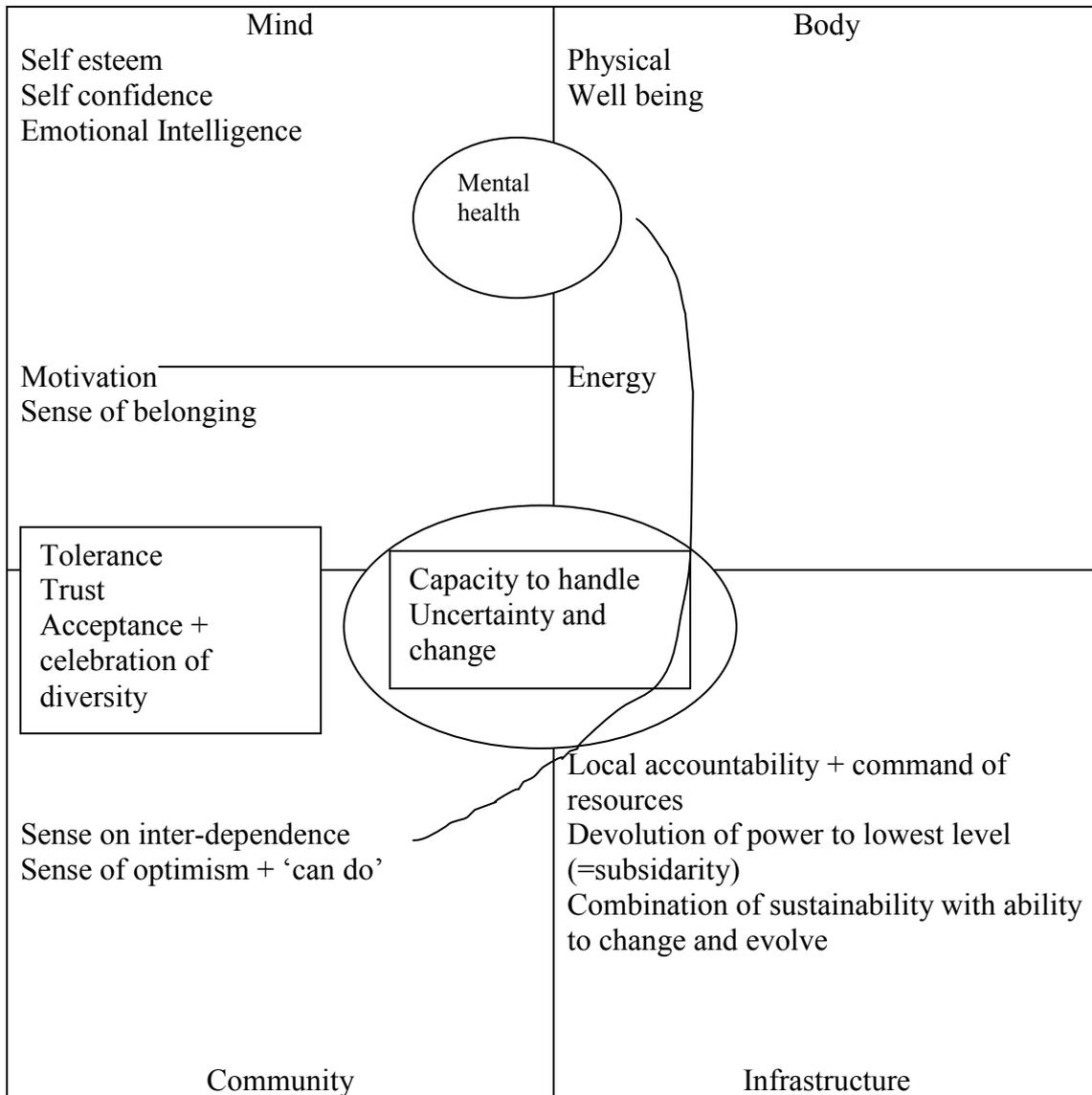
### Three models of a Healthy Community that were developed by different groups

During the Conference, groups of participants drew up models for a healthy community, based on a grid system provided by Christopher Cooke. Some examples of these are given below.

<p style="text-align: center;"><u>I (psychological)</u></p> <p>High sense of self-esteem Validation of personal experience Respected and respecting Spiritually and mentally whole Owning personal potential Secure Empowered Belonging Risk-taking My right to be me</p>	<p style="text-align: center;"><u>It (biological)</u></p> <p>Chosen levels of health from informed choices Access to health sustaining resources and services Capacity building to meet potential Opportunities for empowerment</p>
<p style="text-align: center;"><u>We (community)</u></p> <p>Diverse Inclusive Owning community potential Learning Celebratory Sharing Risk-taking Secure Belonging Unconditional acceptance and promotion of human worth</p>	<p style="text-align: center;"><u>Its (systems)</u></p> <p>‘Ownership’ Collaborative structures for consultation, planning, development, delivery and monitoring of desired goals. Education Networking.</p>

### Ordinary Activities Done Together

<p>Mental well being Moving from the performance to the pleasure principle</p>	<p>Good nutrition Free from disease Self management</p>
<p>Time exchange relationships Conviviality Negotiated value</p>	<p>Shelter Jobs Recreation Family Transport Infrastructures Cycle Friendly High level of education</p>



## **6 Conditions for Systemic Change to More Complex Thinking**

This represents some of the underlying philosophy that was presented by Christopher Cooke during the course of the Conference. It also represents the response of participants to it.

**POTENTIAL** in individuals and/or communities & agencies

**SOLUTIONS** of problems at their present levels

**DISSONANCE** about conditions and the future

**BARRIERS** to change identified and managed

**INSIGHT** into alternative forms and means

**CONSOLIDATION AND SUPPORT** in transition

### **POTENTIAL**

- mutual respect between agencies and community
- capacity building to address and achieve aims
- work towards a common vision
- close collaborative structures for consultation, planning and action

### **SOLUTIONS**

- provision of opportunity for empowerment
- local conditions as action-based agents
- mutual acceptance of a diversity of approaches
- provide opportunities for empowerment, through recognition and celebration of small self-valued achievements

### **BARRIERS**

- centralised culture of short-termism
- blocking effects of vested interests and roots of power
- community disaffection from major decision making
- institutionalised culture of individualism
- top down dominance of community agendas

### **DISSONANCE**

- centralised policies vs. community testament
- statutory vs voluntary perspectives
- business aims vs. social and community aims

### **INSIGHTS**

- focus on the dynamics of the community
- 'open door' attitudes to ideas, proposals and discussion
- encourage the community to articulate answers or approaches to local problems

## **SUPPORT AND CONSOLIDATION**

- appropriate funding streams (lottery, NOF, trusts, LA's, PCT's)
- detailed joint plans and agreements

# Appendix 1

## Pre-Conference Expectations

These are statements made by some of the participants prior to the conference, expressing their ideas about what makes for a healthy community, what they see as vital, and their hopes for the Conference itself.

‘Everyone has a chance to thrive, from employment, access to services, be feeling safe, included and valued for who they are.’ - Beth Smith

‘If Broxtowe estate is to become a healthy community it will be enabled, knowledgeable and stable. For the estate to become healthy it will become closer to the average, develop a positive image and become anonymous.

My/our role is to support local people to identify and create opportunities that will enable them to take control of their health, and that of their families. My role is to bring my passion and knowledge into play and to encourage, support and cajole people to find their voice. To stand up and question.’ - Bethan Morris

‘Healthy Community’ is another way of talking about sustainability’ - Tim Gray

‘Healthy communities and healthy individuals are totally linked. Healthy communities etc allow people’s full potential to develop. A healthy community strives for equality/acceptance etc. A healthy community is one where members are empowered and feel a sense of commitment to that particular community.’ - Richard Eddleston

‘Making a contribution to my local community, using my skills, knowledge and experience for the benefit of the community I live in; increasing social capital; co-ordinating and encouraging/facilitating multi-agency working to develop a Healthy Community in its widest sense. Developing a plan to meet local health needs as part of the community plan, and ensuring it’s delivered through various agencies.’ - Clare Ashton

‘Helping our Children (Nottingham’s children) to achieve their full potential’ - Carolyn Caldwell

‘Being truthful – saying how tired and demoralized many community development practitioners are – doing less.’ - Brian Davey

‘Promoting the extraordinary opportunities offered by allotment gardening Using land no one else wants (yet)’ - Penny Collier

‘Full inclusivity by race/ethnicity/disability/disadvantage. Wished for health solutions rather than external agencies. Respect the wealth of community experience and the absolute truth of community testimony.’ - Julie Cassidy Gosling

‘To effect, as a person who celebrates both my own cultural heritage and the multi cultural environment in which I live, culturally and racially inclusive strategies to promote health for all sections of the community.’ - Fiann

## Appendix 2

### A Collection of Key Statements Around Healthy Communities

This is a collection of key words that were drawn up by participants early in the conference, which express what they feel are the ingredients that go to make up a healthy community.

Holistic Health  
Empowerment  
Community powered  
Local Power and Local capacity  
Locally planned  
Share Power Locally  
Accountability and respect  
Bottom up vs. Top down – local needs and wants  
Done it for ourselves, Involving People  
Involving People – done it for ourselves  
Open minds – really working together  
Corporate – Health work force – Social Responsibility.  
Togetherness  
Agencies working together  
'Change' together  
Working together  
Mainstream Good Practice – joined up working (we've done too much thinking)  
Collaborative and meaningful Consultation  
Clear shared visions  
Courage  
Real Action take risks  
Positive thinking  
Think Upside Down  
Confidence to challenge and to engage  
Resources  
Give us the money  
Sustaining projects – resources and support for people.  
Stop short-termism in political thinking and funding  
Joint responsibility  
Corporate Social Responsibility healthy workforce  
Mutually supportive integrated approach to individual and collective WELL BEING  
Social Responsibility

## Appendix 3

### List of Participants

<u>Name</u>	<u>Surname</u>	<u>Organisation</u>
Sarah	Andrews	
Clare	Ashton	
Carol	Bacon	
Carol	Barber	
Michelle	Brown	
Jeff	Buck	Broxtowe Partnership Trust
Carolyn	Caldwell	Nottingham City Council
Jo	Cleary	Pedals/CTC
Ian	Cohen	Transport 2000/THIG/Hiye
Penny	Collier	Learning Works for Women
Christopher	Cooke (Facilitator)	5 Deep
Stan	Crawford (speaker)	Newark & Sherwood Energy Village
Lesley	Crocker	NAVO
Patrick	Daley	Dunkirk & Lenton Partnership Forum
Judy	Dimmocks	YOT
Eleanor	Dodd (speaker)	The Woodcraft Folk
Richard	Eddleston (Chair & co-ordination)	HIYE
Cheryl	Elliott	Broxtowe & Hucknall PCT
David	Gilding	Broxtowe & Hucknall PCT
Ann	Goodwin (speaker)	GOEM
Julie	Gosling + 2	FIANN
Tim	Gray	Change Works
Mark	Hidson	Broxtowe Borough Council
Carol	Hodgkinson	Nottingham Trent University
Stephen	Hyde	OCP (LSP for Nottingham)
Unjani	Jani	Indian Community Centre
Tanya	Lawton	
Alan	Marshall	Amicus/MSF Nottingham Trent General
Terry	McDonald	Think Children
Mick	McGrath	New Opportunities Fund
Linda	Morgan-Monk	Notts RCC
Carl	Neal	GOEM
Jon	North (co-ordination)	Networking Action with Voluntary
Claire	Parker	University of Nottingham (Student Union)
Chris	Preston	Gedling PCT
Alan	Simpson (speaker)	MP
Gary	Smerdon-White (speaker)	Greater Nottingham Partnership
Sarah	Smith	Boots Company
Nicky	Swetnam	NEA
Richard	Thomas (co-ordination)	HIYE/Mencap
Helen	Thompson (co-ordination)	HIYE/PCT
Dr Michael	Varnam (speaker)	Health Development Agency
Conall	Watson	University of Nottingham (Student Union)
Jane	Zdanowska	Ashfield Development Project
		FIANN
		FIANN
	2 representatives from	The Woodcraft Folk
<b>Apologies</b>		
Heather	Downey	Learning & Skills Council
Giles	Matsell	Learning & Skills Council
John	Taylor	Chair Nottingham Health Action Group

## Appendix 4

### Invitation to the Event

## Creating a healthy community?

An invitation to participate in a process of sense  
***Making, visions, decisions and action.***

*Thus the task is not so much to see what no one yet has seen,  
But to think what nobody has yet thought about that which everybody sees.*

Schopenhauer

Following the 10<sup>th</sup> Anniversary of the Rio Summit we are curious as to what we in Nottingham have achieved in these last 10 years. How can we build upon the successes? What new knowledge exists today about what it means to be a healthy community? What vision describes what this might be like for the people of Nottingham?

We are dedicated to helping 'Nottingham' answer these questions, celebrate the successes to date and prepare for what comes next in our increasingly complex world.

On the **25<sup>th</sup> October 2002** we embark on a process of sense making. You will experience:

- Hearing a range on influential speakers talk about how they and their organisations are contributing to a 'Healthy Community';
- Exploring the themes in what is presented;
- Making sense of these themes from a fresh perspective;
- Preparing to manage your own enquiry between this event and the Friday 25<sup>th</sup> October

Prior to this event you will be asked to prepare some information that will be essential to the success of the day: This will take approximately an hour of your time before you attend the event. We will send you details of what is required once you have booked your place.

At the close of this first event we will pose some questions that will become the basis for your enquiry in the intervening period. You will also be made aware of a range of showcase events and projects that you will be able to visit.

So if you are passionate about what a Healthy Community is like – complete the form below to register your interest in 25<sup>th</sup> October and a follow-up event on the afternoon of 20<sup>th</sup> November. Full booking details will be sent out later.

## Be prepared to be surprised!