

Lobbying – local engagement with the political process

Our political representatives - whether at a local, national or European level - have an obligation to represent the interests and concerns of all their constituents once elected, irrespective of whether or not those people voted for them in the first instance. While sending off a letter or campaign postcard to a government minister is a useful way of getting a particular message across, direct and personal contact between MSPs and constituents at a local level is a far more effective form of campaigning. In this article, Tom Warrington takes a look at the effectiveness of lobbying as a process both for advocating a community health approach and for raising awareness of specific issues in the run-up to the Scottish Parliamentary elections in May 2007.

Since its re-establishment in 1999 after an absence of nearly three hundred years, the Scottish Parliament has been responsible for a wide range of devolved matters for which it sets policy independently of the London Parliament. Devolved matters currently include education, agriculture, justice, prisons and, of course, health. Thus, our MSPs are in a position to play a very significant role in keeping community health issues firmly on the political agenda. (The Scottish Parliament has a useful factsheet entitled 'You and Your MSPs' which can be accessed at <http://www.scottish.parliament.uk/factfiles/ff4.htm>)

Every person resident in Scotland is represented by one constituency MSP and seven regional (often referred to as 'list') MSPs. It is vital that you lobby one of these eight MSPs relevant to you - MSPs are not allowed to deal with issues raised by people beyond their constituency. Regardless of the political allegiance of your constituency or regional MSPs, it is important to note that, while the party in power formulates current government policy, all MSPs have influence that they can use in Parliament or in government.

You can lobby an MSP to:



- X Ask a parliamentary question
- X Initiate a parliamentary debate
- X Move an amendment to a bill
- X Introduce a member's bill
- X Write to or meet a relevant minister

Now is a key time to make contact and start lobbying – in the run up to the election, both the sitting MSP and prospective candidates from other parties in your constituency will be more than keen to respond to any concerns you wish to raise. While hustings (see article on pg 6), door-to-door canvassing and local events can provide opportunities during the pre-election period to raise issues or concerns, there are a number of other ways to make contact:-

- X Write a letter, send an email or fax
- X Call their constituency office or visit their regular surgery
- X Invite them to take part in an action or organise a public meeting
- X If they are unable to attend, ask for a representative to speak on their behalf or submit a written statement stating their position.

If you require assistance in identifying your constituency or current constituency and list MSPs, enter your postcode at <http://www.writetothem.com/>. Alternatively, visit <http://www.scottish.parliament.uk> or contact the Public Information Service by telephoning 0845 278 1999 (local rate) or 0131 348 5000, emailing sp.info@scottish.parliament.uk or writing to Public Information Service, The Scottish Parliament, Edinburgh EH99 1SP.

At time of writing, the main political parties in Scotland are continuing to make decisions regarding the selection of prospective candidates. These will be finalised very shortly and details will be available from the websites of the main parties.



2007 Scottish Parliamentary Election – What support for Community-led Health?

What does the Parliamentary Election on May 3rd hold for working with communities in bringing about good health for all people? The current Scottish Executive has given commitment in many areas, not least leadership, to the National Task Group on Community-led health, which launched its findings and recommendations on December 9th, 2006. Building the evidence base, capacity building, planning and partnership working, and sustaining successful community health initiatives are highlighted as priorities. But what will successful political parties do in taking forward the community-led agenda? The majority seemed to be convinced that working alongside community and voluntary organisations not only enhances the health of the individuals, but also strengthens participation in decision-making for health services that are responsive to the needs of the most marginalised groups. This was in full evidence at the cross party Parliamentary Debate on community health at the end of last year, when MSPs from all Parties spoke highly of the vital contribution that community and voluntary organisations make to health improvement and tackling health inequalities. However, new MSPs will have to prioritise solutions to fundamental questions related to the long-term sustainability of community-led organisations and strengthen partnership working between community and voluntary organisations and public sector agencies.



Mark Ruskell MSP with Community Health Project organisers from Fife at the Parliamentary Debate on Community Health, Scottish Parliament, November 2006

In this first CHEX-POINT of 2007, we extend the opportunity to Parties to provide a clear indication of what we can expect from them on working with communities in bringing about good health for all people. Five of the six main parties responded, with their health spokespersons highlighting various pledges to the community-led agenda. In order that these pledges are meaningfully taken forward within Manifestos we need to debate further with local candidates. We urge CHEX Network members to organise meetings with local candidates to press for greater detail on how their Parties propose to translate these words into action. To help you organise and get the best from these meetings, we provide a checklist of possible questions for candidates on page 6. The CHEX website and CHEX-POINT Snippets will keep you up-to-date with ongoing local developments. If you need further information, contact Janet Muir at Janet@scdc.org.uk or Tom Warrington at Tom@scdc.org.uk.



Views expressed in CHEX-POINT are not necessarily those of CHEX, unless specifically stated.

**CHEX, Suite 305, Baltic Chambers
50 Wellington Street, Glasgow G2 6HJ
Telephone: 0141 248 1990
Fax: 0141 248 4938
Email: chexadmin@scdc.org.uk
Website: www.chex.org.uk**

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What the different Parties say...

For this issue of CHEX-Point, we invited the health spokespersons from each of the main political parties in Scotland to contribute a short statement on how they would work with communities to enhance health improvement and tackle health inequalities. With the memory of the Parliamentary Member's Debate on community health convened by Green MSP Mark Ballard in November 2006 still strong, and with the Scottish parliamentary elections looming ever closer, we suggested that this would be the perfect opportunity for each of the parties to address the CHEX network of community health projects directly and explain exactly why they deserve to receive our votes. The responses we received are reproduced in full below and CHEX thanks those Members who took the time out from their busy schedules to contribute.

Scottish Green Party

Scotland's biggest killers are all chronic, lifestyle-associated conditions. Advances in medical technology can help to combat some of the consequences, but as a society we need to be addressing the underlying causes of physical and mental ill health. The Greens are calling for a national strategy on Community Health. We know that community-based responses to most health needs are faster, more relevant and less stigmatising. At the moment voluntary sector, independent and community run projects lose out or get forgotten when Executive, local authority and NHS funding is tight. With a national strategy their needs and demands will be able to compete for funding on a more level playing field.

The Greens agree with the WHO in aiming for a society with "physical, mental and social well-being and not merely the absence of disease or infirmity". Stress management, diet improvement, strong social networks, exercise, support for people trying to reduce their dependencies on smoking, drugs or alcohol, cleaner environments and more accessible information on health are just some of the priorities that the next government needs to focus on if it wants to improve Scotland's health.

Scotland may be growing economically, but it is also becoming more unequal. Health inequalities caused by unequal access to knowledge, resources and support must have no place in Scotland's future. Preventative health measures, especially within deprived communities, may already be a rhetorical priority, but only the Greens will ensure that this talk turned into action.

Eleanor Scott MSP



Scottish Socialist Party

Poverty scars the face of Scotland's communities. It is a disgrace that Glaswegian men have a lower life expectancy than a Palestinian man living on the West Bank. The SSP believes in working with Scotland's communities to reduce inequalities in wealth that lead to inequalities in health.

Medical professionals though skilled do not have a monopoly on health wisdom. Campaigners in local communities first identified the link between damp housing and ill-health and then had to spend years convincing sceptical doctors of what was obvious to those living with the problem. Due to local people campaigning against fuel poverty many OAP homes now have central heating. But that heating is useless if pensioners cannot afford to turn it on. Each winter, fuel poverty kills more pensioners than cancer. That is why poverty must be reduced through wealth re-distribution such as scrapping the regressive Council Tax. Scrapping prescription charges would also ensure that those on low wages have access to the medication they need.

We wish to see free school meals for all children, but much more work than that is needed at a community level to ensure access to a good affordable diet. We also want the removal of admission charges to swimming pools & sports centres in deprived communities to encourage exercise.

Centres of excellence may benefit some patients and perhaps more consultants, but the majority of people wish to see continued access to maternity and A & E services in their locality. The SSP stands alongside those local communities battling to retain a local health service free at the point of need.

Carolyn Leckie MSP



b) Tackling Health Inequalities

The evidence shows that the gap between those who enjoy good health and those who do not has widened over the last four years in Scotland?

Question: How would your Party propose to reduce the gap in health inequalities, taking into account policies made by the European Parliament, Westminster, but focussing on what the Scottish Parliament and Scottish Executive can do to ensure that all people experience good health?

c) Promoting equalities and tackling discrimination

Promotion of equality must address all aspects of inequalities from inadequate income to institutional racism, ageism, sexism and other forms of discrimination.

Question: How would your Party propose to ensure that principles underpinning equalities translate into practice in the formulation and delivery of health and social services?

d) Community-Led Approaches to Health Improvement

The majority of political parties are convinced that working alongside community and voluntary organisations not only enhances the health of the individuals, but also strengthens participation in decision-making for health services that are responsive to need of the most marginalised groups.

Question: How would your Party work to support and resource this approach to ensure that it maximisation of impact for individuals and the wider community.

Feel the burn...and 'exercise' your right to Vote!

Voting is the most direct way for people to actively participate in the political process and help decide who will be making decisions on the issues - whether big or small, local or national - that affect us all everyday.

To be eligible to vote in Scottish Parliament and Local Government elections, you must be a British, Commonwealth, European Union or Irish citizen, be 18 or over and your name must be on the Register of Electors. Between September and November last year, every home in Scotland should have received a registration form by post which should have been completed by a member of the household and returned. However, there is still time even if you have not already registered. Contact your local electoral registration office or visit www.aboutmyvote.co.uk to download a registration form which can be returned up to April 18th, 2007.

However, having the **right** to vote means little if you don't **exercise** that right. Recent elections in Scotland and the UK have demonstrated a marked decrease in the number of people turning out to vote. Four years ago, the Scottish Parliament elections and the council polls both had turnouts of less than 50 per cent with 'voter apathy' cited as the main cause. However, research carried out by the Electoral Commission believes that the decline is due to a variety of reasons ranging from a general distrust of today's politicians to mere 'inconvenience'!

On 3 May 2007, there will be two elections; one to elect MSPs to the Scottish Parliament, the other to elect councillors for our 32 councils. While the parliamentary election will once again utilize the form of proportional representation called the Additional Member System (AMS), the council elections will see the single transferable vote (STV) system used for the first time. The size of existing council wards will be increased and either three or four Councillors will be elected to each ward. When voting, you will now be asked to rank candidates in order of preference rather than by making a single choice with a cross. Contrary to the traditional 'first-past-the-post' system, this is intended to ensure a fairer allocation of elected members.

VoteScotland is a joint public information programme by the Electoral Commission and the Scottish Executive which aims to encourage people to register, to explain the voting systems and to inspire and motivate them to vote. The website at www.votescotland.com aims to give you the information you need to feel confident to use your vote.

The choices we will be shortly be asked to make will help to determine the course of our nation over the next four years. Place your vote and play your part in shaping Scotland's future!

Scottish Parliamentary Election 2007

- Debates with Candidates on Community-Led Health

One of the significant contributions that Community Health Initiatives can make in the lead up to the Scottish Parliamentary Election is the organisation and hosting of a hustings meeting. You invite candidates representing the different parties to address an open meeting, and answer questions from members of the audience. Parliamentary candidates have said in the past that they appreciate these meetings, especially if they are well run, and enable candidates to effectively engage with voters. (The Scottish Civic Forum website at www.civicforum.org.uk provides a guide on how to make meetings both accessible and participatory).

Below are examples of questions for local candidates on their parties' proposals for supporting community-led health. If you are thinking about organising a hustings, use some of these, but build on them with more relevant local questions. We'll highlight outcomes from hustings in CHEX-POINT; get touch with either Janet Muir or Tom Warrington on chexadmin@scdc.org.uk.

SECTION 1: QUESTIONS RELATING TO LOCAL CIRCUMSTANCES AND PRIORITIES

a) Health Board and Local Authority's written statements on community-led and voluntary sector health initiatives.

It is often difficult to get accessible information, which clearly shows Health Board and Local Authority's commitment to community-led and voluntary sector health initiatives.

Question: What would your Party require Health Boards and Local Authorities to produce such as within its strategic planning documentation a clear statement, with strategies and targets as to how it will support community-led and voluntary sector initiatives?

b) Accounting of public sector funds to community-led and voluntary sector health initiatives

It is often difficult to get information on the allocation of public sector funds to community-led and voluntary sector health initiatives.

Question: What would your Party require from Health Boards and Local Authorities on annual accounting of any funds allocated to those bodies specifically to support community-led and voluntary sector health initiatives?

c) Partnership working between public sector bodies and community-led and voluntary organisations

The current Scottish Executive promotes the National Standards for Community Engagement to enhance partnership working between public sector bodies and community-led and voluntary sector organisations.

Question: How would your Party ensure that the National Standards for Community Engagement are effectively applied at a local level?

d) National Task Group on Community-Led Health – Local Implementation of recommendations

The National Task Group has recently launched its recommendations on building the evidence base, building capacity, planning and partnership working and long-term sustainability of community health initiative.

Question: How would your Party seek to ensure that these recommendations are effectively embedded within Community Planning Partnerships and Community Health Partnerships?

SECTION 2: QUESTIONS RELATING TO BROADER ELEMENTS OF HEALTH IMPROVEMENT, HEALTH INEQUALITIES AND COMMUNITY-LED HEALTH.

a) Understanding of what impacts on good health

Despite the significant steps made in bridging the social and medical models of health, there remain different understandings, interpretations and priorities of what constitutes and brings about good health.

Question: How would your Party propose to gain greater consensus amongst NHS staff, local authority workers, representatives from community and voluntary organisations and general public on what constitutes and brings about good health?

Scottish Labour

Scottish Labour has a track record second to none on working with communities on health improvement. Our approach has been recognised and endorsed by many national and international commentators, including the World Health Organisation.

Labour's core beliefs of social justice and opportunity for all inform and inspire our work across government, but especially in the area of health improvement. We recognise the health of individuals and our wider nation is rooted in a range of diverse factors which impact on the quality of family life including income, poverty and low pay, education, employment, housing and public transport. For that reason we seek to improve and tackle health inequalities across all of government – a focus on social and economic justice as well as health.

Our targeted efforts for communities most in need are beginning to see us shed our 'sick man of Europe' tag. Whether it be working with pregnant mothers to give up smoking, supervised tooth brushing in our nurseries, healthier meals through Hungry for Success in our Primary Schools, our Health Promoting Schools initiative or promoting health in the workplace we are making a real difference.

In addition to these initiatives, we are embarking on Delivering for Health by creating a health system which will target resources to those most in need, anticipate and prevent ill health and shift the balance of care into our communities from reactive healthcare to a balance of reactive and proactive care.

A healthy Scotland needs to be an ambition that makes sense to everyone. People will make choices and they will decide how to live their lives. The job of Government is to help more of them make the right choices. A healthier life is a better life and our health matters to the kind of life we have and the quality of life we expect. It opens up choices and chances and those choices and chances should never be determined by where you live or the kind of home you were born into.

That is fundamental to all of us in Labour.

Andy Kerr MSP, Minister for Health and Community Care



Scottish Conservatives

We welcome the shift to community healthcare as encouraged by the Kerr report. I believe most parties support this. However to make the shift work we must seriously support and sustain the community health sector, who are currently under financial strain and without whom many vulnerable people would lose valuable health provision and advice.

The funding and support of community health organisations is an area that we as politicians must consider in order that we can provide the stability that is essential to forward planning in the community health sector. The difficulty in identifying and securing continued long-term funding and funding for existing services must be addressed so that great work can continue and expand to reach more of our communities.

We need to develop and build a confident and well-informed society, which will help Scotland's parents to make the health choices that will enable their children to become healthy, well-educated and passionate young Scots. We must continue to educate community groups on health matters, promote good health and encourage individuals and communities to share health-improvement responsibilities and activities. To do that, community based and focused voluntary groups need to be free of Government interference, but financially secure. I would call for a commitment to review funding of the voluntary sector, which plays such an important role in our communities, with a view to securing and sustaining its long-term viability.

We must and will encourage such innovative and effective organisations and we will work to reduce and remove the barriers and red tape that often prevent community groups from starting out in the first place.

Dr Nanette Milne OBE MSP



Scottish Liberal Democrats

The Scottish Liberal Democrats published our pre-manifesto, Bright Future, to share our vision for Scotland. Within one of our key themes, health and wellbeing, we focus on health improvement, community health care and tackling health inequalities.

As Health spokesperson, I want to see excellent community healthcare across Scotland. While we must ensure that our acute care facilities are maintained and kept up to date, the future of healthcare must be local and personal.

Community power is a key theme that runs through Bright Future. Nicol Stephen, Leader of the Scottish Liberal Democrats clearly outlined his vision for the future of Scottish healthcare: "my priority for health in Scotland is to treat more people, more quickly, more appropriately, closer to home".

Scottish Liberal Democrats will pursue a major programme of investment in refreshing existing community health facilities and building new, modern, purpose built facilities. Modernising community health services often provokes emotional responses from communities fearful that their local services are being removed without due cause and to the detriment of the community. We will not shy away from making tough decisions about closing facilities that are no longer fit for purpose. However, we strongly believe that NHS Boards should pledge not to close NHS facilities until new or better suited facilities are in place and the Health Department should assist them in that purpose. In a similar vein, I believe that the current consultation processes must be made more meaningful. Communities must not feel that their views are being ignored because decisions have been made in advance.

We want to see closer working between health authorities and local Councils. Both should also value more highly the contribution made by the non-statutory and voluntary sectors.

Euan Robson MSP



The Voice of the CHEX Network...in an Ideal World!

The immediate wake of the forthcoming elections will see not only the forming of a new administration but also the likelihood that many new faces will be taking their seats at Holyrood for the first time at the opening session of the next Parliament. With this in mind, we asked members of the CHEX network to tell us what they would like to see from prospective MSPs...

Janny's Hoose, Inverness

If only – the powers that be would recognise the importance of how people feel about themselves to their short and long term health prospects. There always seems to be a "quick fix" mentality focusing on short-term goals in health. Waiting lists, waiting times, prescription drugs, treatment of chronic diseases. But what if we could fix things before they broke? What if we could prevent illness and disease? Think of all the money that could be saved, GP's and nurses time, specialist's time, hospital beds, drug bills, not to mention pain and suffering.

Well, the good news is that we can. We have Healthy Living Centres and other Community Health Initiatives that can really make a difference to people's lives and health – physical and mental. Short-term gains include increased confidence and self worth, leading to better health because people look after themselves better (because now they know they're worth it), happier, more secure children leading to well adjusted, healthier adults.

We have the power to break the cycle of ill health linked to deprivation. In our case, for about the cost of ½ a GP, or a very few hip replacements we have the ability to make a real positive and lasting change to many people. Taking into account the savings on prescriptions for anti-depressants, diseases related to poor diet, not to mention the relief of pressure on psychiatric services, we could probably save enough to keep us going. Think of all the extra good work we could do if we weren't spending increasing time on scabbling around for funds. Think of all the money we could save in the long-term.

Do we want to do it, though? Is there the political will to do it? Can the politicians break out of the mould of looking only as far as the next election? We had real hopes of the Scottish Parliament to get away from short-term party political point scoring and make a real difference to the lives of people in Scotland. If we had a magic wand, we would wave it, put a collective hand in the hat and pull out a commitment in cash and kind to make a real difference.

(E-mail: jean.jannyshoose@scotnet.co.uk)

Frances Bryce, Renfrewshire Community Health Initiative, Paisley

Are there any politicians who are magicians? Here's hoping. On my wish list would be:

- ✗ A good strong link between what the Scottish Executive expounds vis a vis the value of the sector to the health of the country and those who actually have the purses i.e. local authorities and health boards so that there is no chance of funding falling twixt and 'tween.
- ✗ A clear funding path with dedicated funding.
- ✗ Mainstream funding.
- ✗ More respect for the work of CHIs in the up-stream work they do.
- ✗ All CHPs ensuring that they have a vibrant, resourced CHI in their area which is seen as important as their primary and secondary care resources.
- ✗ A move away from community health by postcode allocation or any other overly- focused approach which separates and divides communities.
- ✗ Respect and the ability to get on and do a job which can't be completed in short bursts of activity - acceptance that change takes a longer time to come through than current funding allows.

(E-mail: frances_rchi@yahoo.co.uk)

June Vallance, Getting Better Together, Shotts

What I would like to see prospective MSPs do in working with communities on Health Improvement...

- ✗ **Mapping of Area** - Improve involvement of health initiatives being taken into core services instead of losing them completely.
- ✗ **Campaigning** - Healthy Living Centres need support to continue, so sustainability needs to be spearheaded in the run up to and during the election period.
- ✗ **Community Ownership** - Major decisions need to be taken to address the lack of transport services in rural areas, more resources should be made available to enable local communities to organise and manage their own local services.
- ✗ **Engagement** - Development of Health Improvement for the elderly requires targeted resources to allow increased engagement of people aged 50+ and to support their involvement in consultation relating to communities, many elderly people are excluded from such discussions and there are many barriers which require to be taken away.
- ✗ **Youth Consultation** - MSPs need to be seen to be active in a positive way in addressing the issues raised by young people, and again resources need to be provided to enable young people to become involved in the planning, design and delivery of fit for purpose services and initiatives.

(E-mail: junevallance@gbtshotts.fsnet.co.uk)

Scottish Community Development Network – A Community Development Manifesto for Scotland

In response to the Community Development Challenge document (CD2) and issues identified by members over the past year, the Scottish Community Development Network has embarked on a process of developing a draft Community Development Manifesto. The Manifesto is offered to politicians and policymakers, academics and educators and across all sectors and generations as a way of stimulating awareness-raising, understanding and a democratic dialogue on the collective, mutual and equitable benefits of the community development process and approach for all people in Scotland. We are seeking views to inform the information gathering and creation of a Strategy for Community Development in Scotland which forms a substantial part of the Manifesto. It is presented as a contribution to facilitate and promote on-going debate and discussion on community development, and the need for continuing dialogue is fully recognised and positively encouraged. The Network will shortly be distributing the Manifesto to a wide range of stakeholders, and if you would like to view the document, it can be accessed via the Network website at www.scdn.org.uk. You can make a contribution by sending your views to info@scdn.org.uk.