

Response ID ANON-CSJB-7Y3W-V

Submitted to **Advancing our health: prevention in the 2020s**

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From life span to health span

Which health and social care policies should be reviewed to improve the health of: people living in poorer communities, or excluded groups? Please restrict your answers to 250 words.

Medium text box for you to provide your answer to the question **How can we design and implement health and social care policies that do this?:**

Intelligent health checks

Do you have any ideas for how the NHS Health Checks programme could be improved?

Medium text box to enter your answer to the question **Do you have any ideas for how the NHS Health Checks programme could be improved?:**

Upload :

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Staying active

Have you got examples or ideas that would help people to do more strength and balance exercises?

Examples of strength and balance exercises?:

There are multiple examples of this especially through yoga and dance programmes that already exist, many of which are funded by Arts Council England. However, it would be useful to assess the impact of other forms of physical activity (not always identified as 'exercise' programmes but where activity is a key element) for example, volunteering on an archaeological dig, leading or participating in local walks in nature and in the local built environment, helping out at museums etc. This would give a broader range of potential opportunities for people to engage with strength building activities and enable a greater degree of choice but the relationship between the specifics of balance and more general activity might need to be investigated further to ensure good links between people and need. Other volunteering opportunities relating to local Places of Worship (gutter-clearance schemes, churchyard maintenance etc.).

Can you give any examples of any local schemes that help people to do more strength and balance exercises?

Medium text box for you to share your answer to the question **Can you give any examples of local schemes that help people to do more strength and balance exercises?:**

Taking care of our mental health

There are many factors affecting people's mental health. How can we support the things that are good for mental health and prevent the things that are bad for mental health, in addition to the mental health actions in the green paper?

Medium text box for answering the question **How can we support the things that are good for mental health and prevent the things that are bad for mental health, in addition to the mental health actions in the Green Paper?:**

This and other PHE and NHS documents are clear about the importance of the built physical environment and social factors as key determinants of health, a dimension absent from the current health debate – which has focused mostly on new design at building and towns level, - is a more holistic approach to local historic built environments that pulls together the environmental potential of building re-use, the impact of regeneration in historic centres on air quality and local aesthetic qualities and potential of the historic built environment to provide green spaces of value as well as links with the past. This last point, which distinguishes place from new place has the greatest potential for work with mental health challenges (through connection with the past, new perspectives, identity, belonging as well as providing a tool for voices of those living with mental health to articulate the value of place and locality to them in a way that could help us develop future engagement programmes in partnership). In particular, enabling people living with poor mental health to express what a place means to them as a mechanism to enable empowerment, listening by other bodies, and engagement with local place-making. Building on the Heritage Action Zones High Streets programme, being run by Historic England, especially where there is public realm focus for proposals.

Have you got examples or ideas about using technology to prevent mental ill-health, and promote good mental health and wellbeing?

Medium size text box for you to provide your answer to this question **Have you got examples or ideas about using technology to prevent mental ill-health, and promote good mental health and wellbeing?:**

Prevention in the NHS

Have you got examples or ideas for services or advice that could be delivered by community pharmacies to promote health?

Medium text box to provide answer to the question **Have you got examples or ideas for services and or advice that could be delivered by community pharmacies to promote health?:**

Musculoskeletal conditions

What would you like to see included in a call for evidence on musculoskeletal (MSK) health?

Medium text box for answering the question What would you like to see included in a call for evidence on musculoskeletal (MSK) health?:

It would be useful to assess the impact of other forms of physical activity (not always identified as 'exercise' programmes but where activity is a key element) for example, volunteering on an archaeological dig, leading or participating in local walks in nature and in the local built environment, helping out at museums, drawing classes etc. This would give a broader range of potential opportunities for people to engage with activities that they could choose to suit them but which would provide support for MSK conditions. This might be framed as a call for evidence on the impact of cultural and heritage programmes on MSK with the support of ALBs (like Historic England, ACE etc) and the Work Works for Wellbeing Centre and DCMS.

Creating healthy spaces

What could the government do to help people live more healthily:

In homes and neighbourhoods:

Prioritise meaningful interplay between green spaces as part of the built environment offer in new and historic places; commission work in collaboration with others including as Historic England to understand better the advantages of living in well cared for (rather than neglected places), positive spaces (rather than vacant and hidden spaces that affect safety and perceptions of safety) and the value of the historic environment to people and its role in developing civic pride in local architecture and environment. Addressing streetscapes and how they are used with a focus on physical and intellectual accessibility and creating a space that feels safe, occupied and pedestrian, dementia and wheel chair friendly – for more details see <https://historicengland.org.uk/images-books/publications/streets-for-all/>. Furthering inter-generational work, for which local places museums objects and tangible evidence of the past and present can be effective mechanisms for engagement and discussion. There could be a 'what it means to me' national heritage initiative to support community cohesion and mutual trust and tolerance of difference, which whilst key aspects of the integration strategy green paper and action plan are ways to enable communities to thrive.

When going somewhere:

The provision of spaces that enable shade, shelter, rest, activity and provision of public transport all together provide increased opportunity for exercise and increased likelihood of activity built within a normal day. Streets should feel safe and uncluttered with a focus on dealing with neglected places and spaces that fuel fear and avoidance of locations.

In workplaces:

In communities:

Furthering inter-generational work, for which local places museums objects and tangible evidence of the past and present can be effective mechanisms for engagement and discussion. Concepts of belonging and identity are linked to resilience and empowerment, meaning making healthy choices and social engagement helps with addressing isolation, helps healthy lifestyle choices and build trust. If these proven concepts are linked to local communities, their activities and local neighbourhood through their historic environment (as the tool to create the outcomes) more work could be done to support social determinants of health, community cohesion and trust. There could be a 'what it means to me' national heritage initiative to support community cohesion and mutual trust and tolerance of difference, which in line with key aspects of the integration strategy green paper and action plan are ways to enable communities to thrive.

Active ageing

What is your priority for making England the best country in the world to grow old in, alongside the work of Public Health England and national partner organisations?

Other

If other, please specify:

Ensure the voices of older people are heard in local communities and creating meaning locally

Please list any actions we could take that are not listed above:

Older people's experience regardless of their health status should have a meaning and for that meaning to be heard and thereby have value they must be listened to. Society should have reflective learning at the heart of its development through understanding past perspectives and future opportunities both in terms of history, health practice and health experience. The historic environment is a great tool for such an exploration with other partners. Inter-generational work is one way to achieve this and it brings shared multiple perspectives on issues and enables people to feel part of a community and valued as such. Historic England has already done some great work in this area with its Heritage Schools programme (<https://historicengland.org.uk/services-skills/education/heritage-schools/>). Examples could include linking people to the values associated with their local heritage assets and provide a perspective on current values of healthcare; engagement with the past through heritage engagement activities locally delivered; using local voices to create local stories that have relevance to communities and incorporating this into a grander national narrative (delivering wellbeing through avenues of creativity, contributing to something larger, meaning making, belonging and identity, self-worth, building confidence, autonomy, making social connections, etc.). Therapeutic goals could also be developed eg place based reminiscences programmes for those living with dementia, physical activity outdoors with heritage for those with MSK). Existing exemplars can be found in Historic England's Heritage Schools, World War One memorials and Women's suffragette programme and could be used as models for further development into mental health needs.

Prevention in wider policies

What government policies (outside of health and social care) do you think have the biggest impact on people's mental and physical health? Please describe a top 3

1:

Education is the policy area that has most impact on 0-21 year olds – mental health is probably the biggest issue facing schools and Universities at the moment. The rate of suicides in the age group under 25 increased by 23.7% in 2018 (source <https://www.samaritans.org/about-samaritans/research-policy/suicide-facts-and-figures/>). Diagnosed mental health problems affect 1 in 10 children (source <https://www.mentalhealth.org.uk/statistics/mental-health-statistics-children-and-young-people>) and early intervention is crucial to enable them to have a chance to flourish as they grow older. Wellbeing at school however is not just about designated wellbeing programmes it is about approach, culture and embedding the factors known to support mental resilience into everyday activities. Building on existing proven initiatives of working with young people and linking their experiences to where they live (Heritage Schools) more work could be done in this area.

2:

Cultural heritage engagement - especially the combination of creativity and active engagement with the past and with local heritage assets. The advantages of volunteering, participation and creativity are reasonably well established and can help address obesity and health living challenges as set out in this green paper. Place-based cultural engagement activities that focus on past events and places bring within them a USP of heritage that has been shown to impact on people's sense of identity and perspective which centres on their relationship with the past and the meanings and connections this can bring with it. It has a primary outcome of meaning making which supports multiple factors essential for wellbeing including self-esteem, optimism, resilience, engagement, meaning and purpose (as set out in NEF indicators for personal wellbeing). It also creates real opportunities for community cohesion – bringing people together to develop understanding of shared historic spaces.

3:

Planning system: particular attention needs to be paid to the delivery of social and environmental objectives, especially in the following areas • Regeneration including large scale new design (proper goals for the kinds of green spaces than enable people to meet and pause and feel safe; scale that does not dominant existing characterful areas are just two examples; traffic management within historic places for clean air purposes) • Conservation advice on change of historic buildings (proper assessment of the carbon advantages of certain types of conservation work, advantages in maintaining links between people's past and present to provide a solid and psychologically safe foundation for the future) • Works that affect places are not limited to large and holistic schemes and small changes over time can have an impact - managing streetscapes as a local neighbourhood planning issue should be considered as part of this. • Housing need – there is considerable evidence that the numbers of vacant residential properties could help significantly reduce the housing crisis in a green and sustainable way that also could contribute to people's feelings of belonging within a community and existing local place and infrastructure. There should be a renewed focus on the positive impacts of such an approach to creating health places and serving the housing needs of communities.

Value for money

How can we make better use of existing assets - across both the public and private sectors - to promote the prevention agenda?

How can we make better use of existing assets - across both the public and private sectors - to promote the prevention agenda? :

Historic England is the government's advisor on the historic environment its purpose 'To improve people's lives by protecting and championing the historic environment'. We have for years taken an asset based (for us - tangible heritage assets) approach that makes the best of the historic environment because of advantages for carbon footprint, aesthetic contribution to an area, capacity to link communities through shared understandings of the past, and enable a relate-ability between people and place that supports community identity, sense of belonging..

Combining the person-centred and heritage asset based approaches we could develop a framework that focussed on linking place and people – this could be articulated to deliver to social connection and cohesion agenda and belonging and identity; engagement programmes rooted in education and the historic environment (building on existing core functions at Historic England such as Heritage Schools) we could develop strong foundations for early years pupils in understanding perspectives on the past promoting tolerance, history of communities through place, skills building developing confidence and resilience. More could be done with health partners and to deliver social connection, reduce loneliness and isolation and build self-worth through listening to people's stories and providing an opportunity for them to contribute towards the understanding of their local place or personal history. The linking of the tangible historic environment with the intangible sense of belonging and personal stories provides a unique opportunity to get the best out a place, as it is, and a community as was and as it wants to be.

Local action

What more can we do to help local authorities and NHS bodies work well together?

Text box for the question What more can we do to help local authorities and NHS bodies work well together?:

Next steps

What other areas (in addition to those set out in this green paper) would you like future government policy on prevention to cover?

What other areas (in addition to those set out in this Green Paper) would you like future government policy on prevention to cover?:

- More domiciliary visits by physios to get people moving confidently and quickly after operations, falls, long-term hospital stays. There needs to be time for a series of visits in the home and to take people out to get them moving and back into their community.
- Clearer links with education and school-based activities
- More use of the 33,000 social projects run by the Church of England for their local communities, often serving the most vulnerable areas. These dementia cafes, music clubs, choirs, exercise classes could offer a really useful option for social prescribing partnerships. See an individual example with Age UK at , Music for the Moment and Tea and Chat with Age UK at St Marylebone might be OK as urban examples <https://www.stmarylebone.org/whats-on/regular-meeting-events> and more generally at country <https://www.churchofengland.org/more/media-centre/news/full-extent-church-england-work-support-local-communities-revealed>

About you

What is your name?

First name:

Linda

Surname:

Monckton

What is your email address?

Email:

linda.monckton@historicengland.org.uk

In what capacity are you responding?

On behalf of a non-governmental organisation

If other, please specify:

How did you hear about this consultation?

Direct communication from third sector organisation or regulatory organisation

If other, please specify:

Is it okay for the Department of Health and Social Care to contact you in relation to your consultation response?

Yes

Is it okay for the Department of Health and Social Care to use your email address to send you updates about other Department of Health and Social Care consultations?

Yes

How satisfied were you with using the digital online consultation form?

Very satisfied

How could we improve this service?:

About you and your organisation

What is the name of your organisation

Name of organisation:

Historic England

Type of business/organisation:

Arms Length Body, funded by DCMS

What is your role

What is your role in your organisation:

I am Head of Wellbeing and Inclusion strategy, working in a national Strategy unit within our Policy and Evidence Group.

Historic England is the Government's statutory adviser on all matters relating to the historic environment in England. We are a non-departmental public body established under the National Heritage Act 1983 and sponsored by the Department for Digital, Culture, Media and Sport (DCMS). We champion and protect England's historic places, providing expert advice to local planning authorities, developers, owners and communities to help ensure our historic environment is properly understood, enjoyed and cared for.

Heritage can be a potentially democratising process. Individuals and communities can connect with the historic environment, creating meaning and values especially at a local level. The notion that historic places relate to identity is borne out by research. The active engagement of people with the historic environment can, as a result of these core attributes, lead to wellbeing outcomes and addressing health inequalities (individual, community and address social determinants of wellbeing)– whether designed to address exercise, fitness, social connection, education or community cohesion.

Where is your organisation based

Please enter the first part of your work post code :

EC4R

