Glasgow: working together to make a healthier city

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The largest city in Scotland with some 700,000 inhabitants, Glasgow is a city of change and contrasts. A city of change in that it has moved from being seen as a grim industrial area to being named as one of Europe’s Cities of Culture; a city of contrasts in that there are still significant inequalities in health between the richest and poorest areas.

Glasgow has an unenviable health record. The very poor health of a substantial number of its citizens has been recognized by the major agencies in the city for a number of years, and they have been developing collaborative ways of tackling this problem. One of the major successes in this work has resulted from its membership of WHO’s European Healthy Cities Project. It accepted WHO’s invitation to become a member in 1988 because the partner agencies realized that to tackle the city’s inequalities meant working together. Health had to be put back on the agenda for action at city level.

At the heart of the Glasgow Project lies the belief that Glaswegians are more healthy or less healthy according to the ingredients of their everyday lives. Health is the outcome of such factors as personal behaviour, access to services, warm homes, affordable fuel, reasonable employment and good social and physical environments. Clearly therefore, a purely medical approach to changing the health of the city would be inappropriate, so the project has developed a number of partnerships to work on the key issues.

The Scottish city of Glasgow has an unenviable health record. Now ways of tackling this problem have been worked out, thanks to the city’s membership — since 1988 — of the European Healthy Cities project.

Examples of good practice

In its seven years of existence, the project has had a major impact on how the city views and tackles health matters. It has supported developments at both the community and the policy levels which exemplify a new way of working on health; these have been recognized within the city, in Europe and further afield as examples of good practice.

The project is committed to supporting the development of local action projects which attempt to put health-for-all principles into practice, and has already provided splendid examples of the strengths of collaborative work at a community level. Much of the activity has been based on the concept of community health workers. These volunteers are local people who have been trained and given the necessary support. This approach ensures that the work reflects locally defined needs and interests and can therefore win support and be developed.

In Drumchapel, a local council housing estate in the north-west of the city, the Drumming up Health Project has been running for six years. It is based in the local health centre and is funded through a mixture of Government Urban Programme funding and secondment from the health authority. The community health volunteer scheme and the community health library have provided fertile ground from which a number of innovative and exciting projects have grown. These cover areas as diverse as the women’s health network, a breastfeeding support group, an asthma support group, One to One (a counselling and complementary therapy project), a men’s health group, Food Action Drumchapel and a community health newspaper.

In all these activities the local volunteers are key players, having in most cases been the originators of the idea as well as supporting its development. The real collaboration between the local paid workers and the volunteers has been a feature of this exciting and successful project.
Policy development

Viewing health as an outcome of all the activities which take place in a city means that health must have a place in the policies of all the city’s agencies. The project has sought to do this in two main ways: by working with the service agencies themselves to develop a broad-based City Health Plan, and by supporting the preparation of policy initiatives from outside the statutory agencies.

The project supports a number of working groups to explore important areas of health work and bring them to the attention of the city. The project’s Women’s Health Working Group has developed a Women’s Health Policy for the city which has been accepted by all the statutory agencies and is being implemented. The aim of the policy is to improve the health and well-being of women in Glasgow, and it sets out recommendations to be followed whenever issues of women’s health arise in these agencies.

The project launched its city health plan document in March 1995. This document is seen as the first step for the city as a whole to work towards better health for all its citizens. The plan is a collaborative document, since bringing about change of the size and complexity needed to make any city healthy is only possible through joint work. It provides an overview of all the work that is taking place to advance health. A model for the development of joint work is set out, and the plans and proposals of the agencies for further work are described. The plan has been accepted as policy by all the agencies, and a monitoring and development group has been set up.

Over its six years of existence the project has seen the development of collaboration by project partners on a wide range of innovative policies, programmes and projects aimed at the root causes of poor health in Glasgow. A substantial amount of new health work involves upwards of 200 staff all working towards making the city one in which all its citizens are able to reach their maximum potential unhindered by the burden of ill-health.

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