Commission for a Socially Sustainable Malmö

Directive
City council 2010-10-06
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The Commission for a Socially Sustainable Malmö

The Commission’s assignment
A commission has been appointed with the aim of drafting a plan including objectives and strategies for how the City of Malmö should reduce health inequality. Health inequality here refers to systematic differences in health which can be avoided through reasonable efforts. The plan should be a guiding principle for the City of Malmö’s efforts for reducing differences in health between population groups. The starting point is the comprehensive national public health objective “creating social conditions for good health on equal terms” with a focus on influencing the structural requirements for health.

The commission’s aim is to provide the City of Malmö with a foundation and some tools for controlling, prioritising and realising efforts which affect all Malmö citizens’ requirements for health and decrease health inequality.

The commission should
- starting from Malmö’s challenges regarding social differences, injustices and inequalities analyse cause and connection and identify what can be influenced and by whom and how,
- starting from this analysis the commission should come up with suggestions on progressive objectives and analyse possible objective conflicts,
- suggest strategies on how to reach the objectives and suggestions on how the objectives and strategies should be followed-up,
- carry out health economic analysis and weigh the cost against the benefits of realising the strategies,
- especially observe how objectives and strategies can be anchored in different decision processes,
- in light of its work point out any need for change in the municipal organisation, routines for collaboration, governance, with the purpose of strengthening and creating better health conditions on equal terms for Malmö citizens,
- suggest ways to measure and follow the development regarding distribution of health. Adapt these ways to the decisive contexts where the information is used, e.g. the Area programmes for a socially sustainable Malmö, the overview plan, the budget process and management planning. The existing welfare report is an important basis,
- calculate what economical consequences health inequalities have for Malmö and also what effects can be expected from work aimed at reducing differences in living conditions.

Focus is the structural determining factor for health. In light of the health situation in Malmö, the three areas of research, the WHO report Closing the gap in a generation and the national public health policy have been prioritised:
1) **Conditions during childhood and adolescence** The conditions during childhood and adolescence are of great importance for both mental and physical health for the rest of one’s life. Malmö has a young population and the prerequisites for children’s and adolescents’ living conditions are crucial for Malmö’s development.

2) **Participation and influence in society** is one of the most fundamental conditions for public health. A lack of influence and opportunity to affect the living conditions has a strong connection to health. If individuals or groups feel that they cannot influence the own living conditions and the development in society there is a feeling of powerlessness.

3) **Economic and social prerequisites** There is a connection between good public health and a society characterised by economic and social security, equal living conditions, equality and justice. Economic stress and social insecurity cause ill-health, especially mental ill-health and lead to increased health inequality.

In 2008 WHO published one of the most important documents written in the health area during the last decades. This report, *Closing the gap in a generation*, and its conclusions is a central source of inspiration for shaping strategies for Malmö’s current unequal distribution of health conditions. In the report it is established that “systematic differences in health which can be avoided with reasonable efforts are simply unjust and it is an ethical imperative to balance health inequalities. Social injustice is literally a question of life and death”. According to the report there is enough knowledge about what needs to be done to achieve change, but that there is a need for efficient decisions to be put it into practice. Three general recommendations are presented in the report:

1. Improve the conditions for people’s daily life.
2. Tackle the unequal distribution of power, money and resources – globally, nationally and locally.
3. Develop and use methods to measure and follow inequality in health, educate people who are trained to find health’s social determining factors and develop people’s awareness of these.

The report gives an account for some 60 concrete strategies and urges all governments to take the initiative for actions which can influence the social determining factors for health, with the aim of achieving equality in health in one generation. It is not possible to apply suggestions directly to the strategies/actions which have been defined globally. There is a need for a Swedish perspective and not least a local one where the City of Malmö’s requirements for achieving equality in health are defined with concrete objectives and strategies. In the United Kingdom an independent commission has processed the report based on British conditions and suggested actions to be taken. Shortly, a European commission is expected to start work on a revision of *Closing the Gap in a generation* for WHO Europe. It goes under the name of *European Review of Social Determinants and the Health Divide*. The Swedish government has given the National Institute of Public Health an assignment which involves testing to what extent the commission’s conclusions are relevant for Swedish conditions. This report will also be considered, as well as WHO Europe’s work.

The commission should gather experience of how other cities have handled inequalities in living conditions, which can then be compared to Malmö. A development work with focus...
on decreasing health inequalities is in progress in some regions, for instance Västra Götaland and Region Skåne.

In their assembly of 23 August 2010 the City Executive Board decided that the City of Malmö should take part in a preliminary study regarding socioeconomic analysis. The work will be carried out in collaboration with five Swedish cities within the framework of the membership in the Swedish network of Healthy cities. This work will constitute an important basis for the commission’s work.

A natural connection for putting it to practice is the ongoing work in the Area programmes for a socially sustainable Malmö. The City Executive Board has decided to prioritise four areas; Herrgården, Holma-Kroksbäck, Lindängen and Seved. The city’s total resources should be mobilised for the development of these areas. Through collaboration with a number of different actors such as citizens, associations, property owners, entrepreneurs and other authorities solutions to social problems should be realised and the areas transformed from problem areas to innovation areas.

From words to action – a working commission

The commission’s work is based on three important factors:

- Facts, research and science about what influences health determining factors and social structures to achieve equality in health, and how the health situation is in Malmö today.
- Everyday Malmö, i.e. the society in which a change needs to be made.
- New approaches, innovative working methods and forward-looking strategies.

It takes new approaches and innovative methods, which at the same time are based on facts and knowledge about what influences health. Also, the suggestions coming from the commission should start out from everyday life in Malmö and should be able to be put into practise.

The commission consists of a chairman, a head secretary and the necessary number of commissionaires. The City Office is in charge of coordinating the work and setting up the necessary civil servant support.

The Public Health Council is the City Executive Board’s preparatory body for public health issues and should prepare the suggestions and strategies devised by the commission. It is the chairman and head secretary who are in charge of finding methods for this. The Public Health Council’s chairman is co-opted into the commission and by that guarantees feedback to the Public Health Council.

It is an independent commission whose work should be transparent. The commission should invite organisations and Malmö citizens who can share their experiences to take part in analysis and the shaping of strategies. It is important that the commission’s work is made available and that it is communicated both internally as externally. For instance, that can be made through different meetings, hearings/lectures for and with different actors such as Malmö citizens, trade, businesses, interest groups and different educational institutes. Material produced by the
commission can be made available on a website where it is also possible to leave suggestions for the commission and ask questions or raise issues which the commission should shed light on.

The commission should be linked to different reference groups with experts depending on which areas the commission will be prioritising. For instance, that includes contact with Region Skåne’s newly-established council for health, the County administrative board in Skåne, the National Institute of Public Health and WHO Europe.

In Malmö some 100,000 encounters between employees of the City of Malmö and citizens take place every day, at for instance preschool, school and in different healthcare establishments. All these encounters bring experience and knowledge. It is important that the commission devises working methods which make it possible for employees to contribute to the work. It is part of the commission’s assignment to find ways of including competences from different areas and be open to those who in different ways show interest in contributing to the commission's work. The methods for this are left to the commission to organise.

**An independent commission**

The commission should act as an independent committee and has the opportunity to suggest strategies which the municipality should decide upon. This implies that the work should be characterised by independence and originality. The commission can engage external experts with knowledge and experience from relevant areas who are qualified for the point at issue. These experts can work independently in relation to the commission and in realising their task and are responsible for their own conclusions and any recommendations in their respective reports. It is then the commission’s task to independently make decisions based on the expert’s analysis and conclusions.

The commission is an official committee and has to be objective and impartial and exercise equality in accordance with law. Furthermore, the activities must be carried out in accordance with applicable laws for municipal operations. The commission’s modus operandi should be characterised by an open working method and a clear citizen’s perspective.

**Limitation of the assignment**

The commission’s assignment is limited to Malmö’s challenges and requirements. The commission’s suggestions should, however, include how the City of Malmö can collaborate at a regional, national and international level. This can mean that forms of collaboration, contract solutions between different parties etc. can be taken up for discussion.

**Time frame**

In addition to reports at hearings, the commission should deliver a final report with suggestions for objectives and strategies. The final report should be delivered to the City
Executive Board in November 2012. The commission will deliver an intermediate report in March 2012 to synchronise with the budget process and the new overview plan for Malmö.

Background; Appendix 1
More information and news from the Malmö Commission

www.malmo.se/kommission