



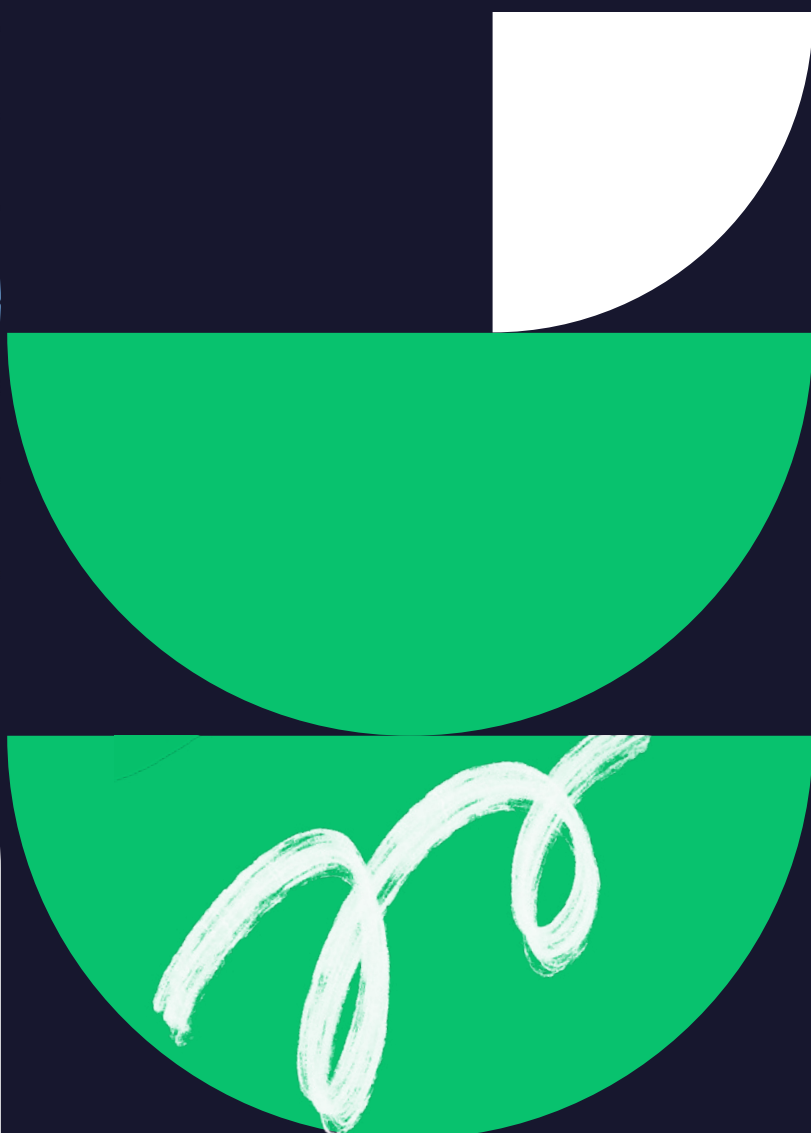
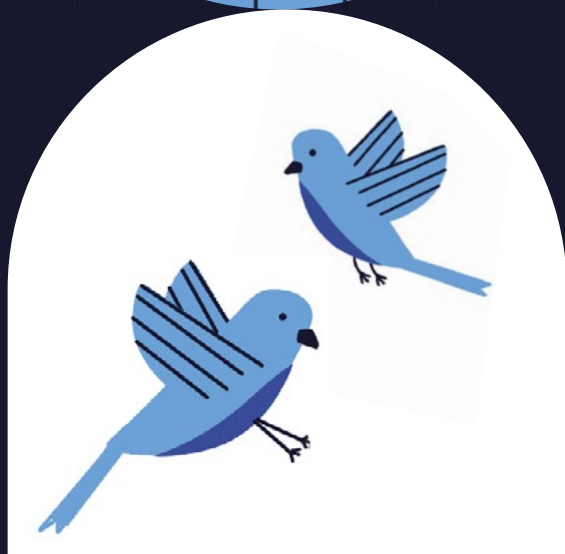
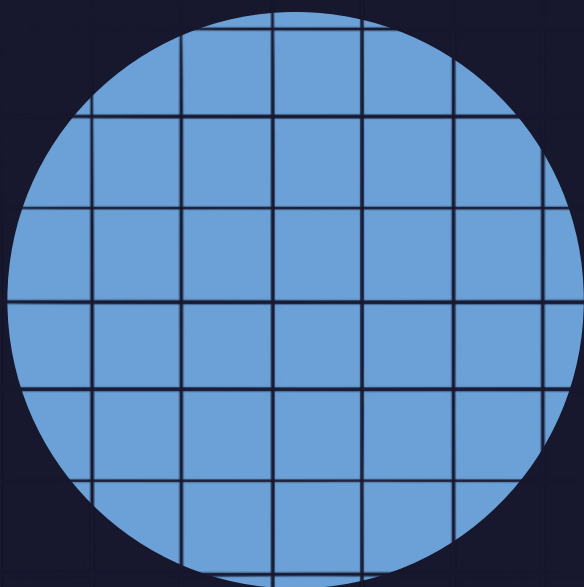
Mental Health
Foundation

Mental Health
Awareness Week

18 - 24
May 2020

Policy Briefing

Why kindness matters in public policy



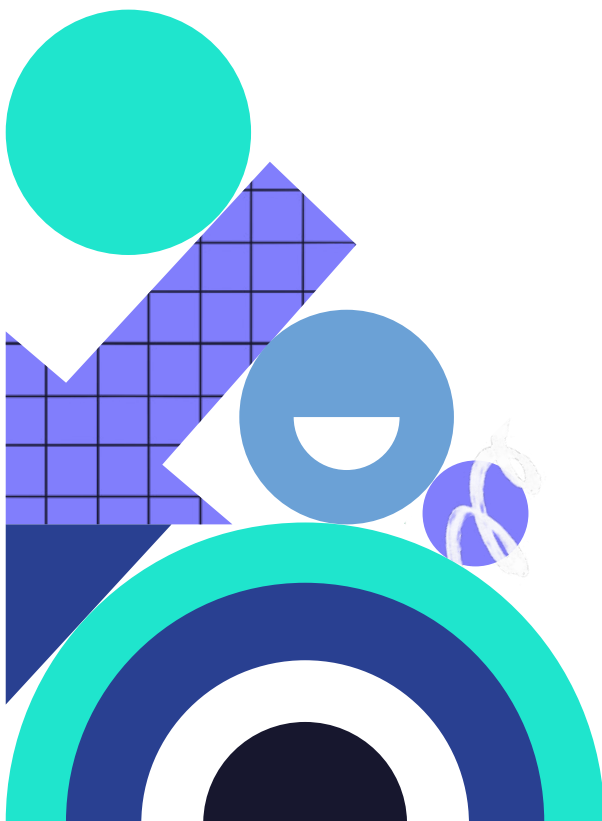
Human connection and relationships are central to our mental health and wellbeing.

Throughout evolution, emotional and social bonds have been essential for our survival – we are inherently social animals.

Empathy and altruism are innate in children, and the capacity for kindness is fundamental to human nature, something that is recognised in the field of positive psychology as a character strength and a virtue.¹ Few people need convincing that kindness is important and beneficial to our human relationships in many, frequently subtle, ways; this has been described as ‘the invisible role that kindness plays in our wellbeing’.²

Given its subtlety, and its rootedness in the subjective and relational, what is perhaps less clear is the role and value of kindness in shaping public policy. Much public policy for the last fifty years has been characterised by efficiency, effectiveness and economy,² with emphases on value for money and short-term impact to the fore, and outcome measures that can be determined more by what can be easily measured, than by what it might be most helpful to measure. This has favoured a transactional, over a relational, approach, which can mask human differences, and be ‘deaf to nuance and individuality... ‘ignor[ing] what really matters to people, and privileg[ing] that which can be counted’.²

Our vision is of good mental health for all. The Mental Health Foundation works to prevent mental health problems. We will drive change towards a mentally healthy society for all, and support communities, families and individuals to lead mentally healthy lives with a particular focus on those at greatest risk. The Foundation is the home of Mental Health Awareness Week.



The dimension of policy-making that is much harder to quantify is its effect on human relationships, which are the core concern of kindness. In policy-making, therefore, kindness has tended to be dismissed as irrational and sentimental.

However, given its importance to our wellbeing, policies affecting our mental health should not ignore kindness.

Rather, they should be fundamentally concerned with what kindness gives individuals and communities, and how the conditions can be created to foster the support and inter-connectedness it offers, including through services that are experienced as being more responsive to people's needs.

To quote Anderson and Brownlie: 'kindness is about social practices and the conditions under which these are more, or less, likely to occur'.³ It is therefore a value that should inform both policy intent, and



assessment of its impact on our mental health and wellbeing, across the whole of government.

There are signs that this is beginning to be recognised. In its 2018 National Performance Framework (NPF), Scotland has adopted kindness as one of its values, stating that: 'We are a society which treats all our people with kindness, dignity and compassion, respects the rule of law, and acts in an open and transparent way'.⁴ It will be interesting to see how this shapes policies, and how they are judged to be effective.

In England, the 2019 NHS Patient Safety Strategy recognises the important role of kindness and civility in creating a positive healthcare culture that supports and promotes patient safety, through the valuing of staff and their contributions, and understanding and addressing factors that might lie behind unkind or uncivil behaviour. Role-modelling kind behaviour is identified as important, giving the examples of: smiling and saying hello in the hallway, saying thank you, recognising what people do and listening with intent.⁵

Current political and social context

Collectively, we are currently living through a time when kindness is very much to the fore, frequently commented on and valued. The COVID-19 pandemic has led to spontaneous, widely recognised and (literally) applauded acts of kindness, from individuals, communities and the private, public and third sectors across the UK. From the one million-plus volunteers who signed up to assist the most vulnerable, to the donation of Personal Protective Equipment (PPE) equipment by businesses, and the kindness shown by the NHS doctors and nurses who have used their own phones to connect extremely ill patients with their loved ones when they cannot be with them in person, kindness has driven our response as a country, in a concerted effort to protect and save lives.

We hope that the kindness we have all witnessed and celebrated, that has moved us and buoyed us up as a society, will herald a resetting of our values as a society. Kindness is about the relational, but it cannot be compelled or required, and needs the right conditions in which to flourish. If we are to adequately respond to the potentially devastating long-term social and economic consequences of COVID-19 we will need public policies that continue to value kindness and demonstrate an understanding of our shared humanity.





The online survey of 4,256 UK adults conducted by YouGov for the Mental Health Foundation in April 2020 suggests that people consider this important, with 72% of UK adults aged 18+ agreeing that 'It's important that we learn from this crisis in order to be more kind as a society'.

However, although a majority of UK adults (52%) in our survey also agree that 'It's important after the pandemic that politicians value kindness more than they did previously,' this figure is lower than the number who want a kinder society, and only 40% agreed with the statement that 'It's important after the pandemic that politicians prioritise kindness in policy-making', while slightly more (43%) agreed that, post-pandemic, 'It's important that politicians prioritise kindness in service provision'. This perhaps indicates that the role of policy, and of kindness in policy-making, for creating the kinder society they want to live in, is less clear to people.

This could reflect a number of things, including the distance many people might feel from these processes, and how they work.

It possibly also reflects the somewhat uneasy relationship that exists between policy-making and kindness, human relationships and emotions, which, collectively, Unwin has called 'the blind spot in public policy',² and Anderson and Brownlie's observation that 'the infrastructure of kindness has a taken-

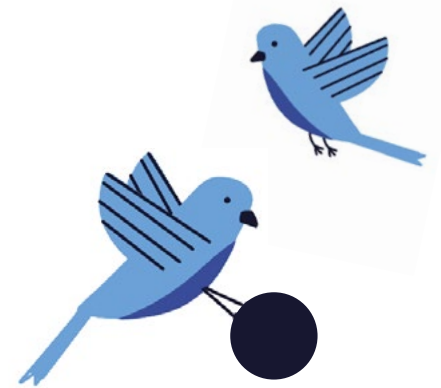
for-granted, background quality, [but], like other infrastructures, it needs to be sustained and maintained'.³

We fully agree with both these assessments, and that, in policy terms, it is most useful for kindness to be concerned with the social (including organisational) contexts which shape our emotional lives.³ It is important, therefore, for public policy to recognise its role in helping to create the conditions for fostering kindness in our relationships and communities, and in the services people use.

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What, then, does public policy look like when it is informed by the value of kindness?



For public policy to be effective it must be trusted and valued by those it seeks to serve. Policies rooted in the core values of kindness, empathy, dignity and respect have greater potential to strengthen relationships and trust between service recipients and providers and may more broadly prompt greater trust between governments, citizens and wider society.

Economic downturns are known to have a very significant negative impact on mental health, including an increased risk of suicide.⁶ And those in our poorest communities, black and ethnic minorities and LGBT+ people, who were already experiencing the greatest mental health inequalities,⁷ are also emerging as being most at risk from COVID-19, and from worsening mental health.⁸ Added to this, many people with no previous history of mental health problems are at high risk of developing them as a result of having to cope with bereavement, trauma and the sudden and ongoing financial, social and psychological effects of job insecurity and loss of employment.

Governments across the UK must take preventive action rooted in justice and kindness to protect people's mental health by strengthening our social safety nets and giving hope to our communities.

We are calling on them to take three immediate steps as a priority:



01

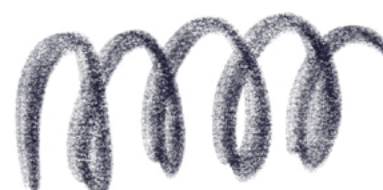
To publish a whole-government COVID-19 Mental Health Response and Recovery Plan to ensure a cross-governmental approach to mental health and reducing health inequalities, and help prevent an increase in mental health problems in the population as a result of the pandemic and its extensive social and economic consequences.

02

To improve infrastructure for social connectedness, national governments should provide a designated funding stream for local authorities to support community development initiatives, including peer support, to promote public mental health. This should be available to all communities and include targeted initiatives for vulnerable communities.

03

To immediately revise elements of Universal Credit and develop proposals for reducing economic insecurity on a long-term basis, as in the section below on dignity in our welfare system.





Looking to the future

Governments and citizens now have an opportunity to recreate a social contract rooted not only in the values of fairness, justice and equality, but also in what has been termed 'radical kindness'.⁹ An important question has been asked of the new NPF in Scotland:

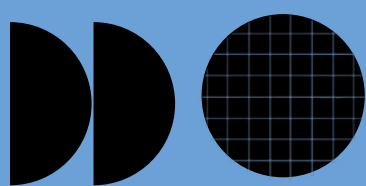


‘Who exactly are ‘our people’ and how far are we willing, individually and collectively, to expand the boundaries of those we are willing to treat as kin [and with kindness]?’

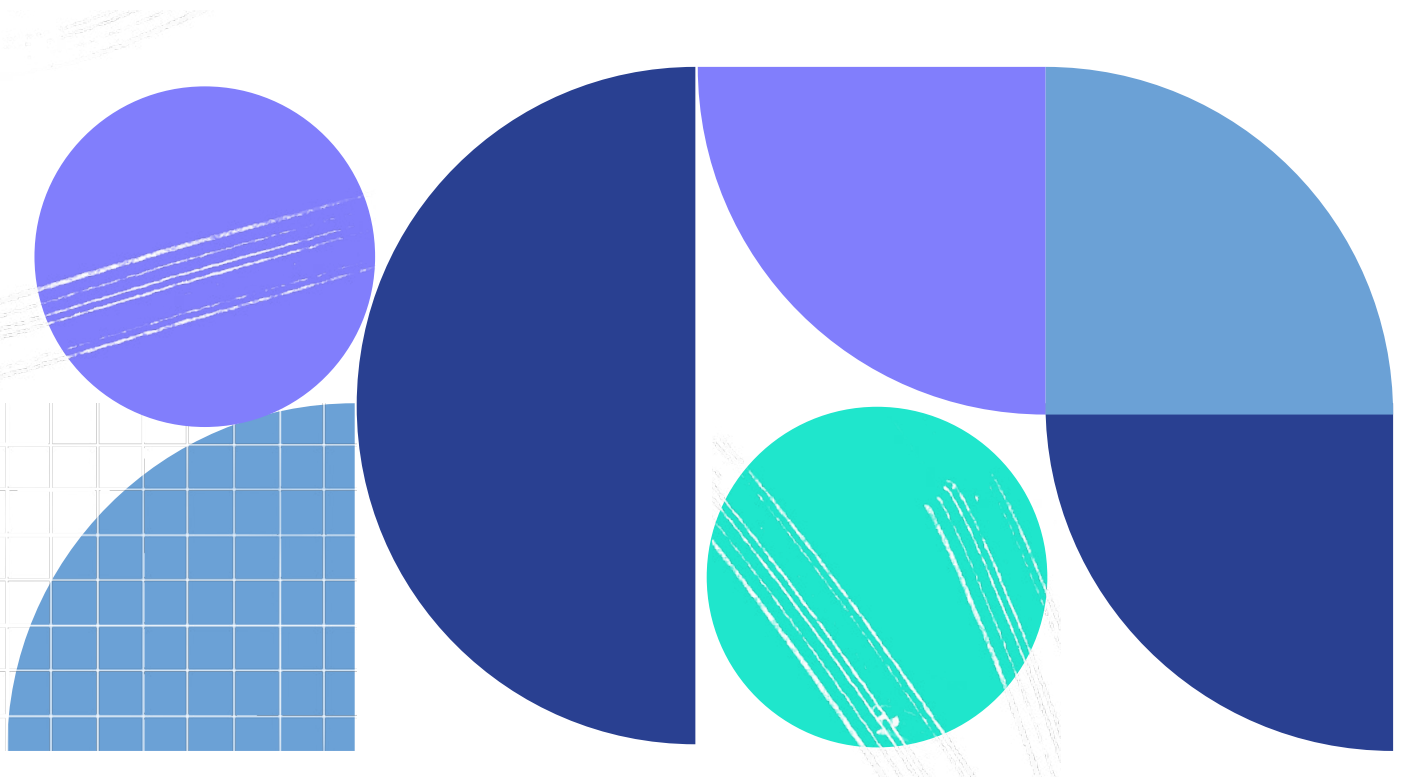
Do we include refugees and asylum seekers, prisoners, the poorest and the most marginalised? Do we really practise radical or difficult kindness and ensure that it is not disembedded from the realm of the social and the political? ... We are used to thinking about kindness as a disposition, as a characteristic that some people just have. But actually it is a practice that involves relational and, ultimately, social and political choices about which and whose needs we decide to notice and respond to.⁹

This is a question that should be asked of all governments in the UK, and it has never been more pertinent.

The Foundation is calling on every government department to undertake a public policy review and apply a values-based approach to all workstreams, with kindness, equality, dignity and respect informing each government framework, with measurable outcomes. This should include developing new metrics, co-produced with the people and communities the policies aim to benefit, such as satisfaction and attention, which require a focus on the relational and the kind, not only on the rational.²



Dignity in our welfare system



For too long, people claiming benefits have been represented in the media as a drain on society.

People who rely on benefits, in particular people with a mental health problem, people on low incomes and disabled people have been stigmatised and intimidated. One study found an increase between 2004-5 and 2010-11 of unsympathetic media coverage of disabled people and fewer 'real life' stories about their experiences, with people with mental health conditions and other 'hidden' impairments being more likely to be represented as 'undeserving'. The authors argue that public policy has both been driven by this, and has exacerbated it.¹⁰ Policies perceived and experienced as stigmatising and lacking in humanity, rather than being supportive and responsive to well-evidenced need, can undermine trust and push people further

into a cycle of poverty and poor health; they certainly cannot be described as being informed by kindness.

The flaws in Universal Credit are well documented: the five-week wait for payments often extends to many more weeks, causing significant hardship, leading to increased reliance on food banks and a poverty cycle which exacerbates mental ill health.^{11,12} Benefit sanctions have done little to motivate people to prepare for, seek, or enter paid work. Rather, they have routinely led to profoundly negative personal, financial, health and behavioural outcomes.¹³

The UN Special Rapporteur for Extreme Poverty and Human Rights, Professor Philip Alston, commented in his report on the UK in 2019, that 'many of the[se] problems could readily be solved if the Government were to listen to people experiencing poverty, the voluntary sector and local authorities, acknowledge their grievances and implement [his] recommendations'.¹¹

Recommendations:

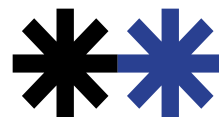
Economic security: The Universal Credit advance payment should immediately be made a grant, removing the current requirement to repay it over the following 12 months. For the duration of the pandemic and the follow-on economic downturn this grant should be given to all applicants, regardless of their circumstances. In the medium term the Government should convene an expert Taskforce to consider the learning from the Covid-19 crisis and develop proposals for reducing economic insecurity on a long-term basis.



Benefit sanctions, which often lead to unwanted stress and anxiety and a worsening of mental health problems, should be halted entirely; this will help both existing benefit claimants and people new to the system.



The Department of Work and Pensions should embark on a radical review of its operations, involving people who benefit from the system. Kindness, dignity, respect and human rights should underpin this review and any consequent reforms – as well as the acknowledgment that any of us could be faced with a change in circumstances, such as disability, illness or job loss, at some point in our lives.



Everyone living with a mental health condition who needs social welfare support should have access to a primary care link-worker in England, and their equivalent in the devolved nations.

Such roles are vital for helping people to live well with their mental health condition. Offering advice and support relating to housing, benefits and other practical needs in a familiar environment can help people navigate the complex world of social welfare support. Ensuring that link-workers are well-trained and rooted in the communities they work with is crucial to ensuring people are offered holistic care that is sensitive to their situation.¹⁴

A public health approach:

Reversing cuts to local authority budgets



Supporting the health of the public is one of the most important ways a government can be kind to its citizens.

However, in England, the public health grant has been subject to year-on-year cuts since 2014/15, leaving the grant £850 million lower in real terms than in 2019/2015

Drug and alcohol services, which routinely support some of the most vulnerable in society, have been cut by £261 million since 2014/15,¹⁶ falling at a faster rate than other public health services.¹⁷ Leaving those in the throes of addiction to the criminal justice system fails to recognise that inequalities, adversity and trauma lie at the heart of country's drugs problem. Drug use is a desperate cry for help from the poorest communities, where drugs are often being used as a form of self-medication for mental ill health. A kindness approach would seek to destigmatise their needs and experiences and offer recovery-based outcomes, as indeed is clearly suggested by public health evidence.

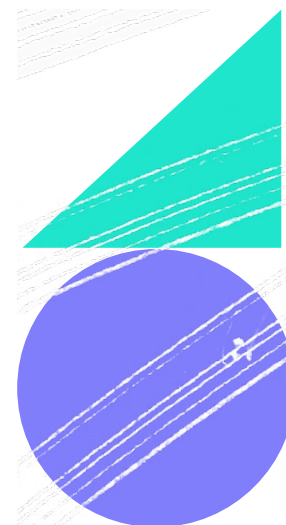
In Scotland, our Freedom of Information data revealed that several local authorities implemented a reduction in suicide prevention spending.¹⁸ It is clear that local authorities are also struggling to maintain budgets for crucial frontline services.

The services most affected by local authority budget cuts – alcohol as well as drug services, smoking cessation services, children's centres, youth centres, sexual health clinics, health promotion initiatives and health visiting services – all benefit the mental health of the most vulnerable in our society; those who are most in need of kindness. Missing out on these services, especially early in life, means that issues that could have been addressed are not, leading to compounding problems and lost potential.

Recommendations:

Cuts to local authority budgets should be reversed, and the government should reprioritise public health and treat health outcomes as a key indicator of success.

Public mental health extends beyond services. Local authority policies should also be informed and guided by the value of kindness, and recognise that financial, architectural and planning decisions about the built environment affect our social environment, and can create or inhibit opportunities for incidental social interaction, as well as longer exchanges in 'third places' such as libraries and community centres.⁹





An end to the ‘Hostile → Environment’

The UK Government's immigration policies introduced by the Immigration Acts of 2014 and 2016 aimed to identify and reduce the number of immigrants in the UK with no right to remain became known as the 'hostile environment' policy and have had a significant impact on the mental health of black and minority ethnic communities, refugees and asylum-seekers.

While this term has now been changed to the 'compliant environment' policy, the original term encapsulated not only the government's approach towards illegal immigration, but reflected – and arguably exacerbated – a broader narrative of resentment towards migrants living in the UK.

Public policy was focused on new targets to reduce immigration, the deployment of "Go Home" vans and cuts to Home Office staff, leading to less human interaction.

The Immigration Act 2016 effectively outsourced immigration checks to the wider public, including GPs, employers and universities, leading to increased discrimination and serious mistakes culminating in the Windrush scandal, which left many people experiencing trauma. Many of those affected by this policy were forced out of work, unable to claim benefits and in some cases wrongfully detained.

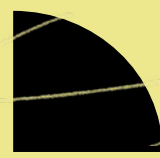
The rise in hate crimes in recent years¹⁹ and the Government's treatment of refugees and asylum-seekers, including inhumane evictions that lead to instances of re-traumatisation,²⁰ continue to be of concern.

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Recommendations:

Radical reform of the UK's immigration and asylum policies are needed to rebuild trust between ethnic minority groups and government. Current policies developed under the 'hostile environment' approach should be replaced by policies that are shaped by the values of kindness, fairness and dignity for all. This should include immediately suspending the 'no recourse to public funds' principle to guarantee all migrants and asylum-seekers access to public services and promoting access to healthcare information in multiple key languages.

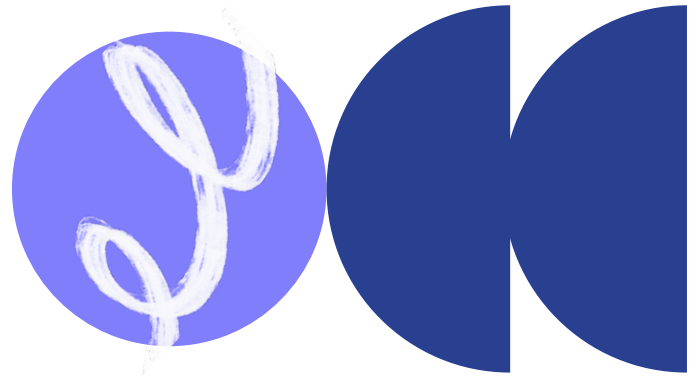
Vision without the blind spot:

**A new social 
contract and a
more inclusive
  economy**

Unwin has commented that:

Kindness changes things – and action on kindness in communities must be met by a new contract, fit for the twenty-first century. This contract [should] recognise that we are at our best when we recognise the importance of emotions and deep human connections. It [should] protect and enhance the instinct for kindness, making sure that decisions, interventions, design, planning and leadership are rooted in an understanding of how we feel. A contract that recognises that public services are always about relationships and emotions. A contract that is written in the two lexicons of public service [the ‘rational’ and the ‘relational’] and helps us all to be more bi-lingual. A contract that will build trust in public services, encourage engagement and make social change possible.²

The pandemic has exposed the fragile nature of our economies in the wake of a major global health event. A response informed by kindness would mean there is a non-stigmatised social safety net that all can rely on. This could take the form of a guaranteed income for all during times of uncertainty and disruption, regardless of their employment status. On a longer-term basis, the Treasury should publish proposals that seek to alleviate economic insecurity and tackle income inequalities, as in our economic security recommendation above.



Robert Kennedy famously stated that “GDP [a country’s gross domestic product] measures everything, except that which makes life worthwhile”. Last year New Zealand was the first country in the world to publish a wellbeing budget, on the back of learning from major local events like the Christchurch earthquake and mass shooting. In doing so it challenged policy makers to consider why, when GDP was rising, all the indicators of the things that they valued, such as child wellbeing, housing and mental health, were going backwards. New Zealand’s decisive action to complement GDP with wellbeing indicators for measuring the country’s success is a significant and welcome step towards a kinder and mentally healthier society.²⁰

Recommendation:

The UK Government should publish a Wellbeing Economy Green Paper, drawing on international experience from New Zealand, and experience from elsewhere in the UK.

In the UK, it should look to Scotland’s National Performance Framework, which sets out a vision for national wellbeing across a range of economic, social and environmental factors, and to the Wellbeing of Future Generations Act 2015 in Wales, which provides not only the ambition and permission, but also the legal obligation, to improve social, cultural, environmental and economic well-being.



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All survey figures, unless otherwise stated, are from YouGov Plc. Total sample size was 4,246 UK adults (aged 18+). Fieldwork was undertaken between 24/04/2020 and 26/04/2020. The survey was carried out online. The figures have been weighted and are representative of all UK adults (aged 18+).