

Compassion in Politics – Written Evidence (LBC0072)

Background

1. Compassion in Politics is a cross-party think-tank working to put compassion, cooperation, and inclusion at the heart of politics. Our work is split into two branches: developing proposals for reforming the political system in order to engender more compassion and creating policy ideas that are built on and spread the values of compassion and inclusion.
2. We are supported by over 50 parliamentarians from six different parties. We are also the Secretariat to the All-Party Group for Compassionate Politics Co-Chaired by Debbie Abrahams MP and Baroness Warsi.
3. Our work is also supported and promoted by a group of academics which includes Prof Alice Roberts, AC Grayling, and Bill McKibben, and by public figures such as the Dalai Lama, Ruby Wax, and Gillian Anderson. We also seek to form partnerships with like-minded organisations who work in the same space such as Carnegie UK, Equality Trust, Action for Happiness, and More United.

Our analysis

4. The Covid crisis has revealed the extent and impact of inequality in British society. People from BAME communities and deprived neighbourhoods have been more likely to contract and die from Coronavirus. They are also likely to experience the worst impacts of the coming economic recession.
5. This inequality has been allowed to fester and grow. For too long our political leaders - with some notable exceptions - have assumed economic growth as a metric for success. As such, rising inequality, increasing poverty, and, in some sections of society, diminishing life expectancy, has been dismissed as a sideshow compared to the ultimate economic goal of GDP expansion, debt reduction, and wealth creation.
6. Covid has shown these economic targets to be at best unhelpful and at worst intensely damaging. Commitment to a failing system has inhibited economic reform on the scale needed to upturn worsening inequality and significantly improve the life chances of those in the most vulnerable circumstances. That we live in the sixth largest economy in the world and yet have experienced one of the highest death rates from Covid speaks volumes about the failure of our economic system to safeguard public services, protect health, and improve wellbeing.
7. This would not have been allowed to happen if institutions of government were orientated entirely towards the reduction of inequality and the protection of socio-economic rights. Unfortunately, as those reading this submission will undoubtedly be aware, the United Kingdom has failed to implement the United Nations International Covenant on Economic, Social, and Cultural Rights - a failure that it has been repeatedly criticised for by successive UN committees and by the UK's own Joint Committee on Human Rights. The 2016 report by the UN Committee on Economic, Social, and Cultural Rights into the application of

those rights in the UK stated their regret that "Covenant rights cannot be applied directly by domestic courts" and felt this contributed to "the disproportionate, adverse impact that austerity measures introduced in 2010 are having on the enjoyment of economic, social and cultural rights by disadvantaged and marginalized individuals and groups."

8. This must represent a turning point. As we emerge from the crisis the government will undoubtedly introduce new measures to prevent the worst effects of the pandemic from being repeated. These will be welcome. They will not, however, be sufficient unless it can be proven that they are designed to change the economic system at a fundamental, systemic level. We need an economy purpose-built to limit inequality and improve living standards for all. That will not be achieved by tinkering and piecemeal change.

Our proposal

9. We do however accept that wholesale change is not easy to implement and can be highly disruptive. Our proposal has therefore been designed to be as frictionless as possible and to give maximum autonomy to government departments tasked with introducing it.

10. We propose that a Health and Wellbeing Committee be established by parliament. This would be tasked with setting national, annual, health and wellbeing targets for the population at-large, with specific targets for the most at-risk communities. The Committee would be expected to build those targets around the health and wellbeing framework already recommended by Professor Michael Marmot and that has been voluntarily adopted by up to 70% of local authorities.

11. The framework described by Professor Marmot consists of:

- Give every child the best start in life;
- Enable all children, young people and adults to maximise their capabilities and have control over their lives;
- Create fair employment and good work for all;
- Ensure healthy standard of living for all;
- Create and develop healthy and sustainable places and communities;
- Strengthen the role and impact of ill-health prevention.

12. We suggest that every department of government be given a duty to work towards those targets. This would include the annual publication of a strategy document by the department detailing how it will ensure the implementation of existing policies and creation of new policies will meet the targets set by the Committee.

13. The Committee will provide expert guidance to departments on how they can adapt their policy programme to work towards the above targets and which of the targets they should prioritise which may not be applicable.

Rationale

14. We believe this proposal will steer the economy into a new direction, providing the impetus necessary to tackle inequality at a systemic level.

15. We also think it important to emphasise the cross-departmental nature of the proposal. Not only do policies have an increased chance of success if there is buy-in across government, it is also important to recognise that every department has a role to play in improving the health and wellbeing of the public. This acknowledgement is central to the work of the Office of the Future Generations Commissioner in Wales which, in a fashion similar to our proposal, requires that public bodies publish details of the work they are doing to improve public wellbeing and safeguard the lives of future generations.

16. We believe the proposal is also reflective of the new reality that we live in because of Covid. The public has undergone a period of mass self-reflection and lifestyle change and initial surveys suggest that this has a profound impact on their outlook, values, and priorities. People report valuing nature, family, and community more highly since lockdown. Only 6% of the public say they want society to return to how it was before Covid and 80% think that the economy should prioritise wellbeing and health over GDP (more on which below). The idea we are presenting is therefore “of the moment.”

Popular support

17. The above idea has gained considerable public, academic, and political support.

18. Last July we sent an open letter to the Chancellor Rishi Sunak urging him to adopt the idea. The letter was signed by parliamentarians from six different parties - including the governing party - and by academics such as Prof Marmot, Prof Klug, and AC Grayling.

19. We have also polled the public on the idea. 76% of those polled said they supported the idea of a Covid Legacy Act which ensures that, going forwards, everyone’s basic needs are met and the public’s health and wellbeing prioritised by the government. This support was spread evenly across voters regardless of party preference. As mentioned in Point 14, according to a YouGov poll conducted in May, 80% of the public want the government to prioritise health and wellbeing over economic growth or GDP expansion.

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