

DEMOS

# THE PREVENTATIVE STATE

REBUILDING OUR LOCAL, SOCIAL  
AND CIVIC FOUNDATIONS

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# Local Trust

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## **ABOUT THIS ESSAY**

This essay is the first in a new series of essays at Demos, seeking to understand what has gone wrong with public services and how we can fix them.

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## **ABSTRACT**

Public services are facing an unsustainable rising tide of demand. In response, politicians across the political spectrum are calling for a greater shift to prevention in public services. This is necessary: public services today are too reactive, intervening too late. To address this we need to move from transactional public services to relational public services.

Yet this essay argues that focusing on a new model for public services is necessary but insufficient, we need a state which is more expansive in how it sees the challenge of reforming public services. That's because to truly reduce demand for public services in the long run, we need to not only prevent problems from arising, but create the conditions for flourishing and resilience within communities. Achieving this means investing in those foundational goods which create the social capital that enables us to lead better lives, without state intervention. Only then can a truly preventative state emerge.

# INTRODUCTION

## THE STATE IS STUCK IN FIREFIGHTING MODE

The state is in firefighting mode. Brexit, the pandemic, Ukraine and the cost of living crisis have trained it to respond to big external events that have ripped through Whitehall, Town Halls and communities. Collectively, we choose between fight or flight - fighting the things we can't ignore, fleeing the ever present structural problems that feel too overwhelming to tackle.

But this reactive, panicked mode runs deeper than the disruption of recent years. The state is now wired to primarily service problems it can't ignore, rather than address the underlying causes and prevent them from arising in the first place. And that servicing of problems is spinning out of control the more we fail to fix the roots of what's going wrong for neighbourhoods across the country.

Critically, we have taken for granted the social solidarity and the community institutions that shape so much of our lives and the way that we interact with the state. These forgotten foundations are in urgent need of repair.

This has led to expensive, late-stage interventions that treat long term illness born of unhealthy lifetimes; that provide costly prison and criminal justice interventions, the result of generations of dysfunction; and that put children into care, with all the costs and a lifetime of trauma that incurs, instead of giving the early help to support families to stay together, safely.

In this essay, we make the case for a different kind of future, enabled by a very different relationship between citizens and the state. We also discuss prevention in a different way to how many people conceptualise it, focusing on the communities where people lead their lives. This is because the strength of communities is a significant factor in determining their need for public services and, crucially for any effort to reform public services, how citizens interact with them.

We need a cultural reset.

## THIS IS DRIVEN BY A BROKEN MODEL OF PUBLIC SERVICE DELIVERY

The heart of our problems is short-sightedness, combined with scarcity that drives the here-and-now rather than the preventative approach. As Professors Paul Cairney and Emily St Denny have argued, the state simply does not understand how to do prevention.<sup>1</sup> When we think about prevention, too often we assume a fraying social fabric that it is the job of public services to correct the problems that emerge from it. In doing this, we design public services that risk further disempowering citizens and undermining our local social, cultural and civic institutions.

This in turn drives ever greater demand on our public services which we seek to manage through targets and spreadsheets, further alienating people and communities. These turn our public services from being a relationship between citizens, to a transaction between consumer and producer. In the end, we know the results. The system breaks down through the sheer weight of demand. In failing to deliver for citizens in their moment in need, we break the bonds of trust that are essential for society to function. Our society, our economy and our democracy are significantly weakened.

So we urge something entirely more ambitious: a fundamental reconception of the role of the state from plugging the gaps in people's lives and mopping up when things go wrong, to building stronger communities, where a rich social fabric reverses the societal fragmentation that is the silent driver of so much demand on public services.

## OUR FORGOTTEN FOUNDATIONS

We must rebuild our forgotten foundations if we want to create a preventative state. In doing so we must rethink and redesign the way that we look at public services. We must reinvest in those foundational goods which create the social capital that enable us to lead better lives - stronger health outcomes, educational results, and even economic

1 Cairney, P. & St Denny, E, *Why isn't government more preventative?*, March 2020

growth. In this vision, the state leans in to enable stronger neighbourhoods, by creating the conditions for connections, building social infrastructure, mobilising people and long term community development - rather than turning a blind eye until the consequences become too impossible to ignore.<sup>2</sup>

This is about defining the public goods we need as a society to flourish, and crafting our policies to support this. It is about the foundational activities the state can undertake to support neighbourhood strength rather than treating its weaknesses. The preventative state is a foundational state.

## LAUREN'S STORY

This is not simply drawn on faith in the power of communities and citizens. As this paper shows, it is based on evidence from across the country and across the world. However, one woman's story describes the consequences of the current reactive system - and the potential for these different approaches to prevention - better than any graph or table.

Lauren was 25 when her children were taken into care. She didn't fight it. She knew she loved them, but that she couldn't parent them. She couldn't protect them from the partner who had abused them, she couldn't prioritise them over the traumatised mindset she was trapped in, she had no family or friends nearby to support her, and she couldn't convince the professionals they were suddenly surrounded by that they could trust her.

Something always breaks in the moment that a child is removed from their parents and in that moment the state assumes a responsibility that will potentially cost millions over the span of their lifetime and affect generations to come. "No one ever helped me, no one listened to me, no one offered the support I needed - years before when I begged for mental health care," she told us. "If I had had proper support much earlier, none of this would have happened."

In children's social care the state has now removed more children than ever before at the cost of nearly £10bn a year. At the same time the money spent on early help for families has been all but removed in many areas. We stopped helping families and it's cost us so much more - in cold, hard cash and human suffering.

What Lauren experienced was the sharpest end of the current, reactive, system. She was left alone for so long, that by the time the state was forced to get involved it was in the most punishing and

catastrophic way: breaking up her family. It was entirely necessary in the moment, but it didn't need to get to that point.

If our services were more preventative, the social work system would have got in there earlier, to support Lauren to leave the abusive partner, to get the mental health treatment she so needed, to mitigate against the grinding poverty that made every single day harder. It feels crass to make the cash case in the context of such heartache, but it would have been so much cheaper in the long run.

If Lauren had a strong network around her in her community, she might not have been so reliant on the abusive partner. Social connection is a powerful mitigation against poor mental health; if she had had people to turn to and the options they can bring, it might have been so different.

A preventative state would not only get in early to provide the solutions to problems before they get out of hand (such as mental health treatments), but build social strength and connections that can mitigate against decline at all.

Right now, stuck in this service rut, the state's problems are only going to get worse. Public services are facing a rising tide of demand that is not sustainable in the long term. Not all that demand will be preventable, but working out what is preventable demand, and why it happens should be one priority. Reengineering services to prevent problems from arising should be a second. But taking a public goods approach to enable strong communities, in connected neighbourhoods, should be the ultimate goal.

There's rarely one root cause of preventable demand for services. People exist in complex systems of social and economic forces. These include poverty, hidden mental health problems, weak social fabric and loneliness, and neighbourhoods that haven't been nurtured to mitigate these. Each of these factors often affect and interrelate with one another. These are not problems that can be solved by directives from Whitehall, or even from combined or local authorities. They are woven into the fabric of the places where people live, the neighbourhoods and the connections in those communities. So are the solutions. Users of public services have too often been conceived as a problem to be solved, but in this vision they are the solution. Ten years after her children were removed, Lauren has got the support she needed, and she has found the communities that nurture her. She now works with social service departments to improve their relationships with people just like she was. She has a child who lives, happily and safely, with her. She is her own solution,

with some careful help along the way.

## **TOWARDS A 'PREVENTATIVE STATE' - FOUNDATIONAL POLICY AND RELATIONAL PUBLIC SERVICES**

We need a new approach to public services that focuses more on providing the conditions for success, less on responding to problems: a preventative state. This is fundamentally local, built neighbourhood-by-neighbourhood, requiring partnerships between people and public servants - not one-size-fits all policy solutions dreamt up and commissioned hundreds of miles away. It is about building relationships of trust and belonging that help people to do the right thing.

Preventative services are too often seen as additional spending. In many areas, budgets that enable community strength and connection were the first to be cut during the austerity era. By taking for granted and underinvesting in our social foundations, additional demand on public services in the short term is inevitable.

The danger is that a long term preventative approach is considered too risky. It is true that the state will have to take risks, involving longer term bets, and it is possible that some won't pay off immediately. We must be bold. Tackling a direct need is much easier to measure than creating the conditions for success, where cause and effect is so harder to determine. It feels so much safer to keep servicing problems, with success measured on the blind delivery of services, rather than the bigger challenge of changing to solve problems.

In this paper we will argue that we are stuck in a doom loop of servicing ever greater problems, without tackling the underlying causes and strengthening social capital in neighbourhoods to prevent them. We urgently need to reset this pattern to ever hope to control public spending. We can't afford not to.

The inspiration for this preventative agenda is out there. There are quiet revolutions happening in pockets around the country that make the case for the beginnings of this new paradigm in preventative public services. In Ewanrigg, Wigan, Thurcroff, Barking and Dagenham, Sheppey, in people grasping the potential for a reset, in partnership with communities. In other areas, communities are taking the lead and demanding help to rebuild their neighbourhoods.

This paper presents a vision for a preventative state and makes the case that looking at the foundations of our communities is the key. At the core of this, is the state supporting and investing

in the foundational activities that fuel social capital and enable people's strengths. This foundational policy is truly preventative, tackling the root causes of problems, creating more resilient communities and more resilient citizens. These foundations are the platform for relational public services that avoid failure demand and dependency, backed by reactive public services that maintain social trust by providing a safety net for all. This is a new national story of how we can do better.

It suggests a way that Lauren could have been better supported, before things got that bad, to keep her family safely together and save the state a lifetime of consequential costs, and subsequent generations of her family the pain of that decision. It suggests a world in which she never would have needed help from the state in the first place, having found strength in her community and the fabric of her own life.

# PART 1

# IGNORING THE FOUNDATIONS -

# HOW WE GOT HERE

Today's state is rooted in the 1940s, the post-war settlement of the Beveridge Report, the public services it paved the way for, and the welfare state it created. It was conceived as an insurance system to fill the vulnerable gaps in people's lives, but also to build citizenship along the way. By providing these wrap around services the state would enable people to become active citizens in their communities.

In the 1940s economic growth was assumed, worklessness would be for short periods of time and illness was expected to be acute and brief. Our lives were more local, more predictable, our social structures more uniform, and our economy less diverse.

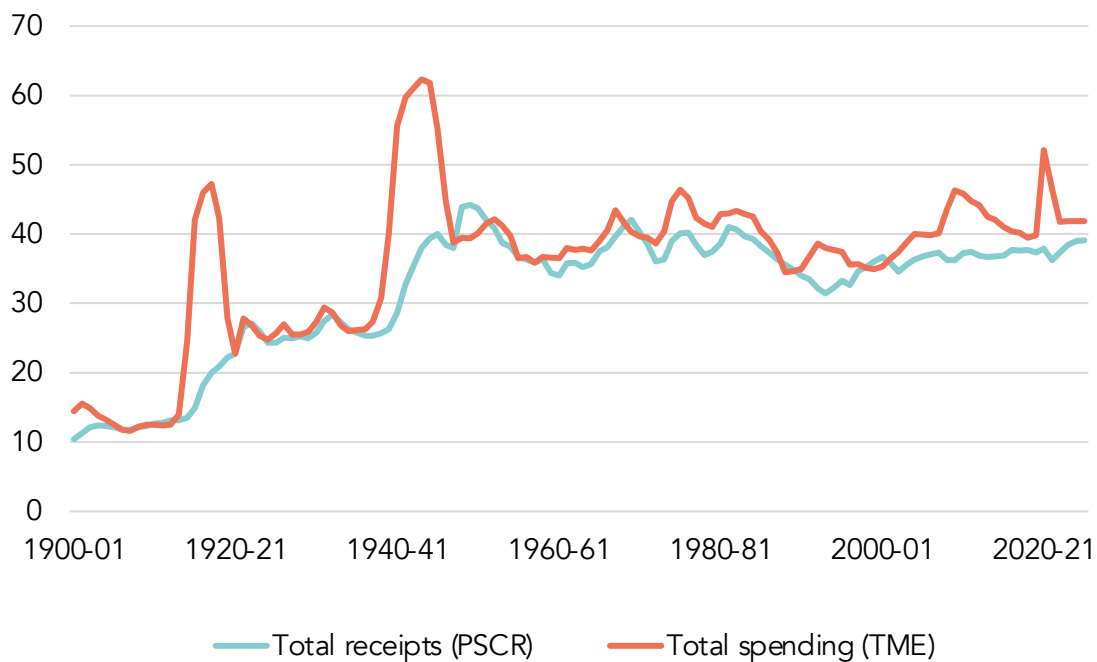
So much has changed since then. Economic growth has stalled, inequality remains stubbornly high, worklessness is less predictable, while employment patterns have changed. We are living much longer and we have more protracted health problems. Our social structures have come under intense pressure, subject to globalised forces and digitisation has changed the fabric of our society, politics and economy.

Somewhere in the commercial transformation of our society, public services have themselves become commodified. We put our faith not in our citizens and communities, but in the theories of the market and public choice. New public management was born in the 1980s to drive a more businesslike approach to public services. It introduced rigour in how public services were measured, opened up public services to competition from the private

sector and reconceived the role of communities in that. We became individual customers to be served and processed.

The market forces in public services did not create incentives to prevent the problems, it created competition for contracts to provide services. It reconfigured services to become a complexity of one-size-fits-all services, that can be scaled and profited upon. Meanwhile, over the decades, the state has expanded then contracted as costs have risen with demand, spreading the state more thinly across the rising need today. Increasingly, this public service machine has actually sucked in the resources that were previously used to maintain the public goods that strengthened communities and prevented people from needing more expensive interventions further down the line. This is despite the fact that evidence shows us the value that investing in social infrastructure has compared to other forms of public spending.<sup>3</sup> It has created a vicious cycle that has diverted policy makers' attention away from erosion of the social and civic institutions taking place across the country.



**FIGURE 1****THE TREND OF PUBLIC RECEIPTS AND SPENDING SINCE 1900**

Source: ONS, OBR

We must not romanticise the past. Today many more illnesses can be cured, women have new and equal rights, globalisation has brought new opportunities and diversity, and the digital revolution has created rich connections and economic potential. There has been much positive progress. But we cannot ignore the reality. In many places, the state is built on foundations that are simply no longer there or in desperate need of repair.

Current public services are often ineffective in the short term and increasingly unsustainable in the long term, either in terms of their outcomes or the financial cost.

The Office for Budget Responsibility's long term forecasts for public spending are now eye watering. The gap between spending and tax receipts is set to increase. "We project... public spending to rise from 38.7 per cent of GDP in 2026-27 to 48.4 per cent in 2071-72. The increase of 9.7 per cent of GDP is equivalent to £245 billion in today's terms. The main drivers of the increase are ageing effects on state pensions and pensioner benefits, and the pressures on health spending from an ageing population and rising non-demographic costs."<sup>4</sup>

Some of the additional demand predicted is the inevitable result of the ageing population; some

costs are the result of medical breakthroughs which thankfully mean more illnesses are treatable; some of the changes are not preventable - in years with more children, more school places are necessary and desirable. In children's social care there will always be a cost of a care system in situations when parents can't parent.

But some of that demand will be preventable. Randall and Kippin in their 2014 work looking at demand on public services set out a typography of demand on public services which we intend to follow.<sup>5</sup> They describe five types of unwanted demands on public services: failure, avoidable, excess, preventable and co-dependent.

<sup>4</sup> Office for Budget Responsibility, *Fiscal Risks and Sustainability 2022*, July 2022

<sup>5</sup> Randle, A. and Kippin, H., *Managing Demand: Building future public services*, RSA, 2014

**TABLE 1**  
**TYPES OF UNWANTED PUBLIC SERVICE DEMAND**

TYPE OF DEMAND	EXPLANATION
Failure	Demand caused by errors or poor processes
Avoidable	Demand arising from behaviours that can be changed
Excess	Demand created by providing more than is needed
Preventable	Demand arising from causes that could be removed earlier
Co-dependent	Demand that is unintentionally reinforced by dependence

Source: Randle & Kippin, RSA, 2014.

This typography is well understood within policy circles, but despite identifying the problems, we are not advancing with the solutions. This is because we have been blinkered to think about demand only from the perspectives of service delivery and effectiveness. Although we know the true source of demand is located much more deeply in the relationships within families, within neighbourhoods and communities, we are still thinking in silos from the perspective of specific agencies.

The truth is that the state does have a role in addressing each of these types of demand, but not simply through reforming public services themselves - although this is necessary and important. It has a much larger role in creating the enabling conditions that allow local social, civic and cultural institutions to flourish, by providing essential public goods (not just economic, but social and civic infrastructure) and by empowering communities. In essence, these foundations change demand for public services before the state is even aware of it. Only then can we address demand for public services in their broadest sense, and the most challenging areas such as avoidable, preventable and co-dependent.

As we discuss later, attempts to reform public services to focus on prevention are also doomed to failure if we are not able to build the social, cultural and civic foundations that shape behaviours at the individual and community level. Most proposals for reforming public services argue that we need higher levels of co-production and trust to shift the dial towards a more preventative approach. However, this

does not emerge in a vacuum. We need to build this culture of participation and engagement to provide the building blocks for a preventive state.

The causes of preventable demand are complex and multifaceted. They span social and economic factors, but many are embedded in local communities, and entrenched in generations of disadvantage. Next, we examine what's driving this demand - focussing on social capital and community. What would this look like if the state's role was to support flourishing neighbourhoods and empower communities to take the lead?

# PART 2

# RESILIENT

# COMMUNITIES,

# RESILIENT CITIZENS

The drivers of avoidable and preventable demand for public services are woven into the social fabric of our everyday life. Partly, this is a story about deprivation. Poverty is the wallpaper to preventable demand across public services - it's so omnipresent it's almost ignored now.

It dictates life expectancy: women in the wealthiest areas of the country outlive those in the poorest by nearly eight years. For men, the gap is 9.4 years.<sup>6</sup> Long term health conditions disproportionately affect poorer people, with worse effects. On average, those in the very poorest neighbourhoods develop long-term health conditions ten years prior to those in the wealthiest.<sup>7</sup>

It dictates your chances of social services getting involved in your family. Children in Blackpool are eight times more likely to be removed than children in Richmond.<sup>8</sup>

But this is not just a question of individual or household poverty. It is also a question of communal poverty, places where access to social and cultural capital has been reduced through the loss of local institutions. These communities suffer a double blow where households face private and communal privation. This communal poverty has worsened the conditions in which people grow up in and lead their lives, not just materially but socially. Unsurprisingly, this has created ever greater demand on the

state which it simply cannot generate resources to meet. These problems have become especially acute in our left-behind towns, communities and neighbourhoods.

The OSCI/Local Trust analysis explores outcomes for 'left behind' neighbourhoods, defined as those neighbourhoods which rank in the top decile of the Index of Multiple Deprivation and the top decile of the Community Needs index.<sup>9</sup> Residents of left behind neighbourhoods suffer much worse health outcomes than other similarly deprived areas in England and as a whole, and have considerably fewer jobs compared to other local areas.<sup>10</sup>

Given this, it's little surprise that demand for public services appears to be much higher in left behind neighbourhoods than elsewhere.

But this casts neighbourhoods as the problem, where in fact stronger neighbourhoods offer the solutions. As the Government's Levelling Up White Paper argued, social capital and social networks - the strength or weakness of the bonds between people - are profoundly important for determining levels of avoidable and preventable demand for public services through creating the conditions for economic and social prosperity.<sup>11</sup>

"Social capital and social infrastructure amplify the forces of economic agglomeration. Good housing,

<sup>6</sup> The King's Fund, *What are health inequalities?*, accessed March 2023

<sup>7</sup> Ibid.

<sup>8</sup> Bywaters, P, *The Child Welfare Inequalities Report*, July 2020

<sup>9</sup> Oxford Consultancy for Social Inclusion (OCSI), *Left-behind Areas: Connectivity data*, 2021

<sup>10</sup> All Party Parliamentary Group for Left Behind Neighbourhoods, *Overcoming health inequalities in 'left behind' neighbourhoods*, January 2022

<sup>11</sup> HM Government, *Levelling Up White Paper*, February 2022, p. 46

high streets, and leisure and cultural activities serve as a magnet for skilled people, meaning those places continue to steam ahead," the White Paper says. "Historically, culture and creativity were at the heart of the Medici effect. So it is in many of today's global super-cities. The opposite dynamic is in play in left behind places." There is a "double dividend" to investing in communities through better, on average, health and wellbeing.<sup>12</sup>

## **CASE STUDY 1**

### **AMBITION LAWRENCE WESTON**

Lawrence Weston is a post-war housing estate in northwest Bristol with a population of roughly 7,000 people, with over 80% living within the most deprived 20% of wards in the city. Its geography and transport links mean residents are often socially and economically excluded.

Ambition Lawrence Weston (ALW) was set up in 2012 to take action after a decline in services and closure of local facilities. Their goal is to oversee and deliver local regeneration on behalf of a resident led partnership. Supported by a £1.15 million grant under the Big Local programme, ALW has brought about significant positive change for the area, helping residents to write a Neighbourhood Development Plan and improving access to affordable housing. ALW has created an employment and enterprise hub to support residents to find work.

The hub offers daily access to the internet, laptops and printers to support people in finding employment. It provides one-to-one support, in addition to self-employment advice, training courses and apprenticeships, confidence workshops and benefits advice. ALW funded and delivered a shuttle bus service, providing essential transport to employment opportunities and services that were previously inaccessible to residents. This enabled the community to develop a business case for a public transport provider to run a local bus service, which is now in operation. And the resident led partnership also attracted a low-cost supermarket to the area, providing residents with access to affordable food options as well as local employment opportunities.

In addition, after discovering that 70 per cent of residents were struggling with energy bills, ALW partnered with Bristol Energy Co-operative to build a solar farm. It generates enough electricity to power 1,000 homes a year, with profits reinvested back into community projects. And in 2020, ALW secured planning permission and external funding to build a community-owned wind farm. The planned 4.2-megawatt turbine will power 3,500 homes and is expected to generate £300,000 a year for the community.

In total ALW estimate that from the initial £1.15m in Big Local funding they have been able to leverage in a further £15m in external funding and investment. They also drive partnership working in the community by bringing together a network of over 40 organisations (public and voluntary) to encourage information sharing, collaboration on initiatives and problem solving through peer support.

This is not just a UK phenomenon. Research in Finland found that higher levels of social trust and reciprocity were associated with positive health behaviours, such as non-smoking and adequate levels of sleep. In addition, social trust and reciprocity were also independently associated with higher self-reported outcomes, including higher physiological wellbeing. The study concludes that “people with higher levels of social capital – especially in terms of social participation and networks – engage in healthier behaviours and feel healthier both physically and psychologically.”<sup>13</sup>

One of the most profound implications of social capital is its mitigating effects on poor mental health and wellbeing. Being connected to people in your neighbourhood gives protection against mental illness, which in itself can reduce health service use, unemployment, crime and even, as we saw in Lauren’s case, potentially children being removed from their families. The pandemic put neighbourhoods under the spotlight: those

with strong social capital saw mutual aid support developing local WhatsApp groups, and people rallying around to help their neighbours.<sup>14</sup> What was less visible was the crushing isolation of others, left alone with no human contact.

Social infrastructure is defined as shared spaces, physical and digital connections, and an active and engaged community.<sup>15</sup> The built environment in this plays a key role - the shared spaces of libraries, pubs, community centres, sports facilities - where people can meet and build social connections. There is strong evidence that access to high-quality green space drives better physical and mental health, including lower levels of obesity.<sup>16</sup> We also know that stronger social connections drastically increase life expectancy. A review of 148 health studies around the world, including the UK, found that those with strong social connections had a 50% higher likelihood of survival compared to those with weaker social connections.<sup>17</sup> Across a range of outcomes, stronger social infrastructure delivers better outcomes.<sup>18</sup>

## CASE STUDY 2

### THURCROFT HUB, SOUTH YORKSHIRE<sup>19</sup>

Thurcroft, a former mining community in South Yorkshire, received funding in 2012 from the Big Local Programme to make it a better place to live. This included developing a new community hub from scratch, on an existing sports ground. In consortium with a range of other funders, the Hub opened in 2017, designed by and for the community. The hub includes sports pitches, a sports hall, a meeting room and events space for hire, and a bar and kitchen for people to relax in and meet one another. The latter is crucial in providing a space for connections to be built and to develop a sense of community.

The Thurcroft Hub has created an invaluable focal point for community activities, providing a home to a wide range of regular groups, activities and clubs. These include mindfulness sessions, football clubs and a ‘walk and talk’ fitness group. One Thurcroft resident describes the benefits as such: “Now that we’ve got the Hub, people from across the area recognise the value of residents sticking together, it has become the real centre of the community”.

13 Nieminen, T. et al, *Social capital, health behaviours and health: a population-based associational study*. BMC Public Health 13, 613, May 2013

14 New Local, *Communities vs. Coronavirus: The Rise of Mutual Aid*, July 2020

15 Bennett Institute for Public Policy, *Townscapes: The Value of Social Infrastructure*, May 2021

16 Public Health England, *Local action on health inequalities: Improving access to green spaces*, September 2014

17 Holt-Lunstand, J. et al, *Social Relationships and Mortality Risk: A Meta-analytic Review*, July 2010

18 Local Trust, *Policy Spotlight One: How social infrastructure improves outcomes*, January 2023

19 All Party Parliamentary Group for Left Behind Neighbourhoods, *Communities of trust: why we must invest in the social infrastructure of ‘left behind’ neighbourhoods*, December 2020

All this evidence shows that we need to rethink the very idea of prevention itself. Is prevention delivering a public service so that you reduce demand on other public services? Or is it creating the conditions for a strong, connected community to emerge in which residents lead better lives where they are and so are therefore much less likely to need to use those public services?

There is an indirect, but important, benefit in this approach too. Demos has repeatedly called for a more 'relational' approach to public services.<sup>20</sup> In this vision of public services, communities are given greater control over the way that services are delivered and users are treated as citizens, with something to offer and contribute to resolving the challenges they face. There is a growing body of evidence to show that this approach delivers not only better outcomes, but is also more efficient than the 'marketised' approach to public services over the past forty years.<sup>21</sup>

However, to make services relational, and to reduce failure, avoidable, preventable and co-dependent demand, we require high levels of social and civic capital. We need to trust those institutions that deliver public services, we need to trust in our communities and we need to trust in ourselves. The most effective way to do this is to invest in our social institutions.<sup>22</sup> There is no other way to create relational public services.

This is born about by the evidence that is available. In Wigan, for example, alongside the 'Deal' to build stronger partnerships between the community and local authority to improve public services, there has also been investment into community institutions to facilitate that engagement. The 'assets-based' approach that Wigan has pursued has been effective, but it requires 'assets', what we are describing as foundations, to work effectively. Policy makers must avoid thinking that there are short-cuts to public service reform which can avoid investing and engaging with these local institutions.

In the jargon of public services reform, we often speak about getting 'upstream' to solve problems, but all this leads to public servants having to swim against the tide. The call to reinvest in our communities is a call to get to the source of the challenges we face. It is a call for resilient communities that make for resilient citizens. This is the mindset of the preventative state.

20 Demos, *The Social State: From Transactional to Relational Public Services*, July 2021

21 New Social Covenant Unit, *Social Capitalism*, October 2022

22 Local Trust, *The Double Dividend*, July 2021

# PART 3

# THE PREVENTATIVE STATE

The preventative state requires a fundamental shift in the way that government, at all levels, thinks and acts. At the core of this shift is recognising the importance of **foundational policy**.

This means investing in the social, civic and cultural institutions that enable foundational activities to take place. The places where you can bring your family. The space to meet with friends. The chance to participate in local social and civic life. The religious, sporting and cultural institutions that draw us together. The voluntary associations and charities that give additional meaning and purpose to our lives. The bonding and bridging institutions that society depends upon.

Ultimately, these foundational activities can only be measured by their effects and, sadly, in their absence. They require policymakers that are prepared to put their trust in people and in communities. Not a blind trust, but a willingness to look holistically at the problems we face. We need to recognise that although they are vital in the effort to move to a preventative state, they are goods in themselves. Instrumentalising these social, civic and cultural goods is the quickest way to undermine them. This is why we must treat this as a policy approach, rather than a 'service'.

This cultural shift is not only about foundational investment. It is about recognising the power of these institutions and collaborating with them, building services around the strengths and assets of local communities, rather than imposing solutions upon them. It is framing our policy questions in foundational terms.

New public management theory and the 'consultocracy' often see these institutions as inefficient or ineffective. They would prefer to put resources only into services that directly 'deal' with the problem and that are easy to quantify or measure. It is this approach that, for example, sees a reduction in public safety and thinks only of increasing police officers. In 1961, the number of people in England and Wales per police officer was 807. Now there are 462 people for every police officer. Yet despite the relative increase in police officers, one in three people feel unsafe in a quiet street close to their own home or using public transport at night.<sup>23</sup> One of the reasons for this is people sense an increasing isolation in their neighbourhoods. It is only strengthening the foundations of social and civic institutions, a foundational approach to policy making, that we can reverse these trends.

Delivering this foundational activity will require new models and methods. The success of the Big Local programme, for example, has led to calls for Community Wealth Funds to be created which can provide long term, patient investment into local communities. This call has now been accepted by the government. This needs to be backed up by meaningful investment and resources. Community Wealth Funds on their own will need to be part of a policy ecosystem that strengthens our social foundations. Funding to enable communities to take on local assets and put them to local use, such as the Community Ownership Fund, will need to be expanded. Large structural programmes, such as the UK Shared Prosperity Fund, will need to be adapted so that resources can flow into local social and civic institutions that underpin social and economic

<sup>23</sup> Office for National Statistics, *Perceptions of personal safety and experiences of harassment, Great Britain: 16 February to 13 March 2022*, accessed March 2023



prosperity. A preventative state will use every lever at its disposal to strengthen our social and civic foundations.

### CASE STUDY 3

#### COMMUNITY SHOP ON THE WARWICK HOUSING ESTATE, WEST YORKSHIRE<sup>24</sup>

The Warwick housing estate in Knottingley, between Wakefield and Leeds, was built to house those working in local mines and power stations. These have now been closed for some time, meaning there is a lack of locally-available jobs and community spaces, social facilities and shops. In response to these challenges, the resident-led organisation Warwick Ahead seeks to build on existing social bonds through creating a Community Village - a set of community spaces on the local estate, designed to meet the needs of local people.

As a first step towards that, Warwick Ahead established a Community Shop on the estate. This aims to provide a space for local people to get together, socialise and perhaps learn new skills. It also seeks to provide a designated place for residents to explore future economic and social activities. The Community Shop today provides a place for local people to meet, talk to one another, have a coffee and play games. Support services are also provided on a weekly basis by Citizens Advice.

Once this shift has taken place, we are then in a position to reform our public services so that they better meet the needs of citizens. These will be more locally based, in tune with people's lives and needs. They will be **relational public services**. Citizens putting trust in those delivering services and citizens providing services putting trust in those that are receiving them helps shape the way that they deliver them. They will be based on Sen's capabilities approach, which means recognising that the networks people have around them are critical to their flourishing.<sup>25</sup>

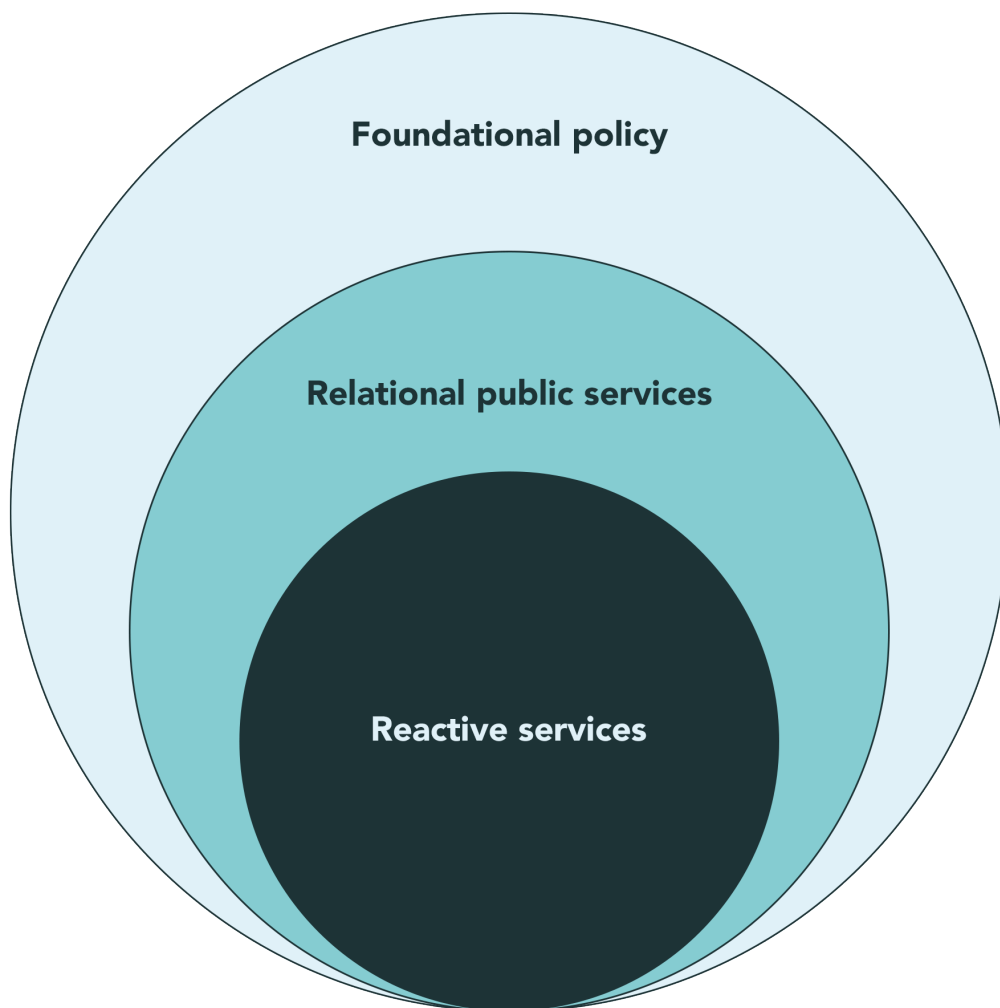
Relational public services will lead to greater prevention through considering people holistically, looking at how they have got to where they are, the relationships and networks around them and treating them as a citizen whose view is to be respected, rather than tolerated. They will be more tailored in their approach, building in greater time for co-production.

<sup>24</sup> All Party Parliamentary Group for Left Behind Neighbourhoods, *Communities of trust: why we must invest in the social infrastructure of 'left behind' neighbourhoods*, December 2020

<sup>25</sup> Global Poverty Research Group, *The Capability Approach: Its Development, Critique and Recent Advances*, January 2005



**FIGURE 2**  
THE PREVENTATIVE STATE - FOUNDATIONAL, RELATIONAL, REACTIVE



Over time, we will need to shift resources towards these relational public services that seek to tackle preventable demand and its root causes. Interestingly, the government has started to embrace this approach through the development of Family Hubs, that look to support families with more early help, youth club provision that give young people activities and purpose in areas where there are not many opportunities. These in turn build on the lessons learned from the success of Sure Start centres in a previous generation. Social prescribing, which has been found to dramatically reduce demand on acute services, is another form of relational public services. In Rotherham, the then local Clinical Commissioning Group took this approach and has seen extraordinary results. Inpatient admissions fell by as much as 21%. A&E admissions fell by as much as a fifth and outpatient admissions reduced by a similar level. Over five years, it is estimated that the local NHS would save around £1m a year – a return on investment of £1.98

for every pound spent on the service.<sup>26</sup>

Many public health measures would fall under this bracket - smoking cessation, weight loss services, earlier intervention for mental health services and in-work employment support to help people navigate their careers without falling into worklessness. To be effective, these need to be delivered by trusted local institutions, particularly those in the hardest to reach places which have the lowest levels of trust in the state. Relational public services will work with communities and citizens to get ahead of these challenges.

In our typology, relational public services would carry out both primary and secondary prevention, with the former defined as action that reduces the incidence of problems within a population and the latter action that detects problems at an early stage and intervenes then. Over time, these relational public services should become the main way that we deliver public services. However, these services must not be

confused as the only way to deliver prevention. Only in combination with a well resourced foundational policy will we be able to truly get to the source of the challenges we face. This is because foundational policy seeks to get upstream ahead of even primary prevention; creating the conditions for success, rather than preventing the arisal of problems.

Furthermore, relational public services depend on strengthening our social, cultural and civic foundations to enable people to develop the habits of participation and active citizenship. In many places and service areas, communities have been disempowered and their voice has been marginalised. This approach has not only reduced the incentive for local people to bring their experience to assist in building better public services, but it has also meant that people have forgotten the arts of deliberative and participatory structures. We cannot assume that simply opening up the way we deliver public services and calling for a relational approach will have any effect, unless we are able to create the conditions for people to feel empowered and to develop the habits of active citizenship. We must learn from work that is taking place, for example, the Creative Civic Change programme, that is helping us to better understand how community leadership works in practice.<sup>27</sup>

Relational public services, built on community power, are themselves dependent on the state pursuing an expansive *foundational* policy.

There will always be a need for reactive services. They can be delivered in a relational way, but fundamentally they are a social safety net, to meet acute moments of difficulty or challenge. Their role is not to prevent problems, but to stop them getting any worse and to do so in a way that does not undermine our social bonds. In doing so, they compliment the work of our relational public services and the social, civic and cultural institutions that build resilient communities and society. Examples of these are our accident and emergency services, our police services or our fire service.

Of course we are in a messier world than typography can capture. But we need to conceptualise these different levels: our foundational policy, our relational public services and our reactive services so that we can effectively balance between them. Otherwise, we will again take for granted the social, civic and cultural institutions upon which all public activity depends.

We know what will happen if we continue on as we are. Sticking plasters will not do. We need to comprehensively rewire the way that the state operates. At the core of this will be a cultural shift, taking in a wider and longer term perspective. This will involve difficult choices and will require public institutions to let go of some of the resources and power that they have accumulated, but it is the only way to deliver a better future.

**TABLE 2**  
SHIFTING FROM THE REACTIVE STATE TO THE PREVENTATIVE STATE

	TODAY - REACTIVE STATE	TOMORROW - PREVENTATIVE STATE
<b>FOUNDATIONAL POLICY</b>	<b>Dwindling</b> - significant cuts to local authority budgets have weakened foundational policy	<b>Thriving</b> - re-investment in policies that seek to rebuild neighbourhood foundations
<b>RELATIONAL PUBLIC SERVICES</b>	<b>Scaled back</b> - serious cuts to preventative budgets have led to a reduction in the number and scale of preventative services	<b>Predominate service activity</b> - investment and shift towards relational public services embeds a preventative, long term approach to public service delivery
<b>REACTIVE SERVICES</b>	<b>Predominate service activity</b> - reactive services make up the bulk of public service spending and activity  A transactional mindset governs the delivery and design of reactive services	<b>Scaled back</b> - investment in relational public preventative services means reactive services can be scaled back over time  <b>A relational mindset</b> governs the delivery and design of reactive services

27 Creative Civic Change, Pitching In: Lessons on Sharing Power from Creative Civic Change, April 2022

This will require leadership at every level, from ministers and civil servants in Whitehall to community leaders on the ground. This vision is not based on hope. The evidence is there, the case studies are there, if we want to see them. A preventative state is possible, but it is not the state that we know today.

# CONCLUSION

## A BURNING PLATFORM

We are stuck in a doom loop servicing problems over prevention. No one could argue for the status quo. We say that we cannot fund prevention because of the fiscal and economic environment. Yet not funding prevention and ignoring the need to build up the resilience of individuals, families and communities is only making things worse.

But it goes further than that, a society that is not strong, healthy and resilient sees lower productivity and long term growth, further exacerbating our fiscal position. The mistake of the past decade has been to overlook the connection between strong public services, strong communities and a strong economy: the emergence of more economic inactivity among older workers after the pandemic, that has not been mirrored elsewhere in the world, has focused policy makers on more supportive and thoughtful services to help people with complex problems back into work, because it is vital now for economic growth. A lack of consideration of the fundamental pillars of our community is sapping us of our workforce and our economic resources.

We are on a burning platform. We cannot stay where we are. We must move.

Fortunately, there is now welcome attention on our public services, the outcomes they generate and their structural weaknesses across the political spectrum.

Policy makers need to be brave to cut this Gordian Knot and develop a long term plan for identifying the resources required to build a preventative state. Priority should be given to this agenda over competing short-term economic fixes, for example tax cuts to stimulate demand. We should see social infrastructure as being as vital as physical

infrastructure to growing the economy and our nations' prosperity. This will take bravery and boldness. It will mean standing up to those that see the way to deliver prosperity as coming only through economic infrastructure, ignoring the pivotal role of the social. It will mean going against the grain of forty years of thinking that has led us to the situation we are in today. It is always easier to carry on than to make mistakes, this is why we need humble policy makers.<sup>28</sup>

Alongside the reconfiguration of policy making that we have identified, there are wider changes that we will need to see to create the conditions for the preventative state to emerge.

### VALUING RELATIONSHIPS

The preventative state recognises the value of relationships. Demos has made the case for relational public services extensively and there is growing momentum around these ideas. But there are challenges in how we policy makers consider these issues. Too often discussions of relationships are shrugged off in policy making circles as "fluffy" or "nice to have" side issues. It should be the heart of everything we do, particularly if we want to transform our public services. Stronger relationships, within families, within communities and across society are at the centre of delivering a better future. We cannot deliver more effective services, improve lives, generate better outcomes and save money through disparaging the importance of relationships.

A good society is one in which citizens are able to flourish, reaching their full potential. We only discover this potential in our relationships with others. In the end, relationships are the very core of

our existence and so we need to shape government policy with this insight always in our mind.

## **TRUE DEVOLUTION TO NEIGHBOURHOODS**

The revolution we are calling for has to be local, based in neighbourhoods, where people's lives are made. You cannot deliver a preventative state from a spreadsheet in Whitehall. We need to localise power with a truer form of devolution to neighbourhoods. At the moment, devolution risks creating mini Whitehalls across the country - swapping one begging bowl culture for another.<sup>29</sup> There is a risk that we transfer power from one group of people that citizens do not trust to another. We need to go further, to devolve power further to local communities to decide on the things that matter to them - from spending decisions, to planning and prioritisation. We must also give communities greater power to hold local decision makers to account. There is cross party consensus on devolution - but not to this level of boldness and ambition. Local Trust has also made a strong case to transfer power and spending decisions to neighbourhoods.<sup>30</sup> We're Right Here's campaign for a Community Power Act is growing in momentum.<sup>31</sup> These are the kinds of initiatives that we need to develop and expand.

## **SILO-BUSTING**

There is much that will be challenging in changing the system but there are few elements that are as hard as tackling the current siloed nature of our state. The lack of joined up activities across the state renders individual's experiences frustrating and sometimes futile. If people are seen through the prism of the problem a service is trying to solve, that's what the service will provide, rather than seeing the root causes we identified earlier such as poverty, isolation or poor mental health.

A siloed system is not human centred and won't be efficient. The state has been talking about human centred design for over two decades and it still struggles to achieve it outside of the more transactional activities of tax returns and driving licences. At Demos we are exploring the role digital can play in tackling silos and enabling more relational work in public services. However, we will need to be bolder. Relational public services will require place-based and place-led organisation of the public sector. The most effective interventions, such as the Supporting Families Programme, have

focused on the needs of people and localities, not the office politics of Whitehall or Town Halls. We need to develop Human Learning Systems across our public services, rather than the command and control feedback loops of previous generations.<sup>32</sup>

The truth is that the silos are breaking down anyway, just not in a planned or designed way. Schools are dealing with the fall out of underfunded social services, police are the frontline of mental health crises, GPs are servicing a loneliness epidemic. We still have a chance to avoid collapse, but it will require bold solutions. We think those solutions begin in neighbourhoods, with local leadership powering that human centred design.

## **NEW UNIVERSAL APPROACHES TO SERVICES**

Universalism is perhaps most easily understood in contrast to means-testing: providing certain services or benefits only to those deemed to be without means (e.g. income). In the UK, the NHS is an example of a universal service; social housing provision is an example of a means-tested approach. In recent years there has been a renewed interest in universal services. A good example is the work done by UCL's Institute for Global Prosperity on Universal Basic Services (UBS).<sup>33</sup> Inspired by the rise of Universal Basic Income, advocates of UBS instead call for all citizens to access free, basic public services.

One argument for UBS is often that such services are needed to enable each citizen's safety, opportunity and participation in society. At Demos we think universalism is also an enabler to relational public services. For example, job clubs open to all can be used to help people get back into work. This is going to be more effective if a wider proportion of the population are participating in that service; to be expected if a service is universal, not restricted. It will also reduce the stigma associated with conditional services, stigma that often further undermines trust within communities. What is true for job clubs is true for after-school clubs, community-based social care and many other areas.

This is a 'public goods' approach to public services, recognising their value as essential parts of our social and communal life, rather than viewing them purely as instruments of public policy. Spreading access to these services, embedded in communities at a hyper-local level, is the radical reform agenda of our time.

29 Demos, *Teed Up for Success*, January 2023

30 Local Trust, *Trusting Local People: Putting Real Power into the Hands of Communities*, February 2023

31 We're Right Here, *Introducing the Community Power Act*, accessed March 2023

32 <https://www.humanlearning.systems>, accessed March 2023

33 Social Prosperity Network, *Social prosperity for the future: A proposal for Universal Basic Services*, 2017

Universalism will involve costs, and we don't anticipate appetite for widespread universalism in the current fiscal context, but there are surprising savings to be made: in work services, a universal offer to support people in work with career development can reduce unemployment before it happens. Moreover, the overall cost may not be as large as policy makers think, particularly if they are prepared to reform our broken tax system.<sup>34</sup>

### FOLLOW THE MONEY

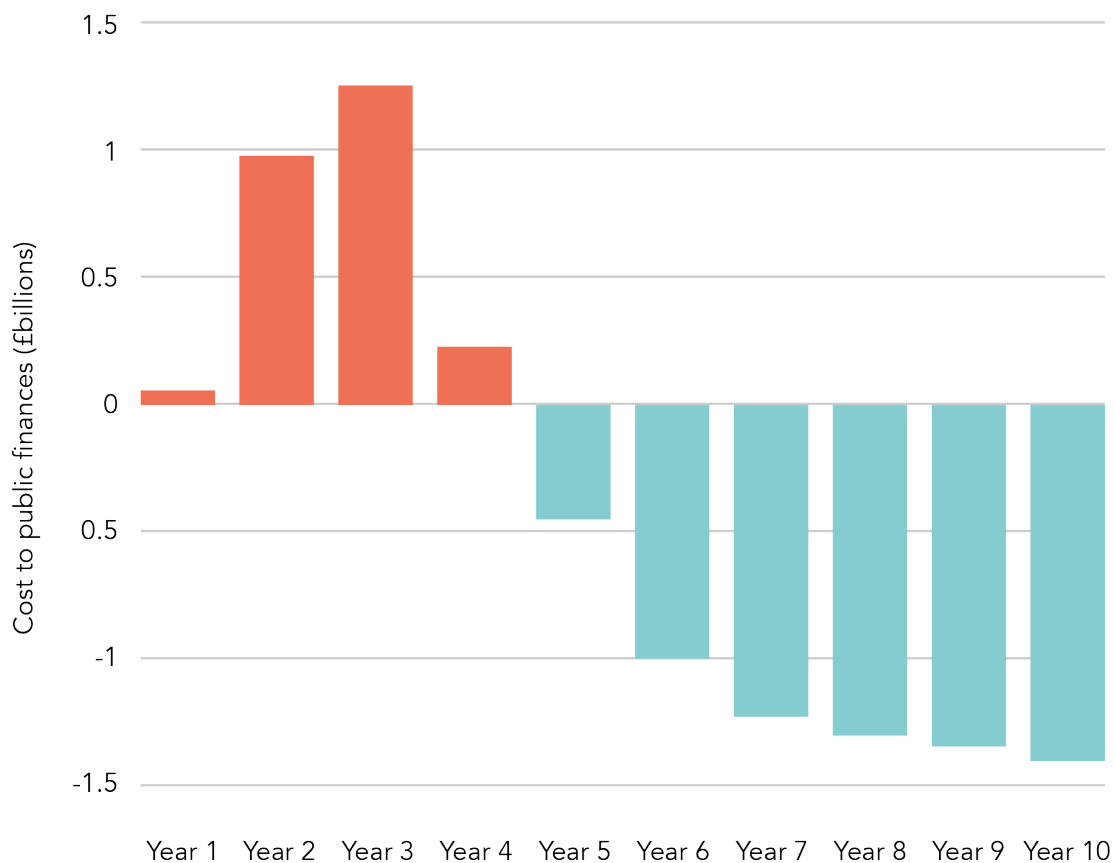
Alongside the cultural shift this will all require, the funding question will be the hardest to tackle. You can't simply turn the current public service tap off in order to reset provision around the preventative state we have described. While few would disagree with the shift to prevention, no one has found a way to square this circle within the current funding mechanisms, economic pressures and political appetites. In the current risk-averse spending climate, we have created a system that favours existing costs – even if they are ballooning out of control – over investment in trying something

different to prevent the costs being incurred in the longterm. This will take bold investment.

Going back to Lauren's experience in children's social care, over the course of her parenting, councils' costs for removing children into the care system have grown every year as more and more children have gone into the care system. At the same time support for families in the form of early help has been stripped away. Through austerity councils have pared back what have been seen as discretionary spending, only to face ever bigger statutory costs of the things they can't ignore. It's a human tragedy and an economic folly.

In 2022 Josh MacAlister, the independent reviewer of children's social care, made one of the most compelling cases for preventative spending, in his blueprint for change.<sup>35</sup> MacAlister asked for £2.6bn to turn the tide in the numbers of children going into care by providing early help to families. That investment would be recouped within ten years through the resulting reduction in the care bill meaning the new services would eventually pay for themselves – and some.

**FIGURE 3**  
COSTS TO PUBLIC FINANCES OF CHILDREN'S SOCIAL CARE REFORMS PROPOSED BY MACALISTER REVIEW



34 Ibid.

35 [https://webarchive.nationalarchives.gov.uk/ukgwa/20230308122535mp\\_/https://childrensocialcare.independent-review.uk/wp-content/uploads/2022/05/The-independent-review-of-childrens-social-care-Final-report.pdf](https://webarchive.nationalarchives.gov.uk/ukgwa/20230308122535mp_/https://childrensocialcare.independent-review.uk/wp-content/uploads/2022/05/The-independent-review-of-childrens-social-care-Final-report.pdf)

More importantly, 30,000 fewer families would be separated as a result of this investment. He made the case for upfront investment to, in the long term, save money and suffering. The government response was £200m and the ambition of the whole project was throttled.

Delivering a preventative state is going to take bold new thinking about funding.



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