



How we can make more effective early interventions in vulnerable communities to deliver long-term regeneration?

A Full Outcomes Paper from a SURF Open Forum event

Purpose of this paper: This paper is intended to encapsulate the general flow of this SURF Open Forum event, which comprised keynote speaker presentations and an interactive panel discussion session. The views stated reflect, wherever possible, the broadest consensus or range of participants' views on the keynote theme.

There are three parts:

- Part One (p2-5) is a broad overview of the outcomes.
- Part Two (p5-10) is a summary of the plenary speakers' presentations.
- Part Three (p10-13) is a more detailed reflection of the subsequent open discussion.

Readers will also find it useful to refer to the associated PowerPoint presentations available on the SURF website. A shorter summary version of this paper is also available (see page 14 for links).

Open Forum Event Details

Date and venue: 5th May 2010, The Lighthouse, Glasgow

Plenary Speakers and Panel Members:

- Elisabeth Campbell, Team Leader, Early Education and Childcare, Scottish Government
- Karen Grieve, Programme Manager, Health Improvement & Health Inequalities, Scottish Government
- Laura Ross, Social Inclusion Policy Officer, Scottish Government
- Tom Wood, Special Adviser on Early Interventions, Capital City Partnership.

Chair:

- Edward Harkins, Networking Initiatives Manager, SURF

Participants: Over fifty participants from local authorities and national government, housing associations, voluntary sector organisations, community groups, higher & further education institutions, private sector companies, employment intermediaries, community enterprises and the NHS.

Part One Main Outcomes of the Open Forum Discussion

Chair's opening observations on the current environment for early intervention

1. This forum on early intervention took place against a background of economic recession and continued unfair inequality in the UK. There are many authoritative commentaries on this situation, for example:
 - The UK Government's March 2010 report, [Anatomy of Economic Inequality in the UK](#), confirmed that 'unjustly inequitable life chances and life circumstances' are drivers of poverty and poor health in the UK. Professor D. Dorling's recently published [Injustice: why inequality persists](#), illustrated how living in one of the most unequal advanced countries in the world – the UK – negatively impacts on most of its population.
 - The UK Government's March 2010 report, 'Anatomy of Economic Inequality in the UK' also demonstrated the importance of policy interventions', and that, 'public policy can ensure that access to important aspects of life... does not depend on income.' – a stance supported by findings in Professor Dorling's *Injustice, why inequality persists*.
 - Mike Foulis, Director of Housing and Regeneration in Scottish Government, stated at the [2010 SURF Annual Conference](#), that the credit crunch and ensuing economic recession meant that, 'The property led regeneration model is now effectively broken...'

The relevance and need for early intervention

Participants were in general agreement that:

2. The high degree of inequality in the U.K. must be of significance in any discussions on early intervention. Early intervention to address the fundamental causes of unjust inequality afflicting early childhood holds one 'best hope' for breaking down deeply embedded intergenerational inequality across the UK.
3. Early intervention is highly relevant in a Scottish social policy context where the Scottish Government has fifteen top level objectives or national outcomes. National outcome five states that: 'our children will have the best

start in life and are ready to succeed'. National outcome seven states that: 'we have tackled the significant inequalities in society'.

4. There is a growing body of international evidence which shows that the greatest scope for personal development, and the highest risk of damage to cognitive development, lies in children before they have reached the age of four or five. (USA psychiatrist Bruce Perry et al) This is reflected in the Scottish Government's [Early Years Framework](#), where it is stated that:

'The period between pregnancy and three years (of a child's age) is increasingly seen as a critical period in shaping children's life chances, based on evidence of brain formation.'

5. For many participants there is an economic case to be made, as well as a moral imperative, for early intervention. A Scottish Government speaker cited recent work in the UK which indicates that for every £1.00 invested in early intervention, some £7.10 is returned in terms of savings; mainly through the avoidance of the need for later, costly and often ineffective, interventions.

Current progress and learning – and going 'upstream' into even earlier intervention?

6. There were ample presentations at the Open Forum on the evidence and case studies of successful implementation and development work around the entire range of the [Equally Well](#), [Achieving our Potential](#) and the *Early Years* Scottish Government policy frameworks. These included an emphasis on learning experience and evidence. This can be obtained from current pilots, test sites, collaborations and partnering etc., but also from earlier experiences with, for example, Social Inclusion Partnerships.
7. Scottish Government speakers explained how the *Early Years Framework* contributes mainly to the Scottish Government's Outcome five. Also that, arguably, the framework has an impact on all fifteen of the National Outcomes and a strong impact on at least seven of them.
8. Some participants with long experience in the field judged that early intervention in the U.K. had been largely ineffective because it was 'too late'. This was argued to be due to an over-reliance on statutory triggers. It was further argued that anyone seeking to change the lifestyles and damaging behaviours of target clients had to contend with the materialism and individualism in today's consumer culture. For some participants this was an argument for even earlier intervention – referred to as early, *early*, intervention.
9. Action Points in the *Equally Well Implementation Plan* were described as 'going upstream' into early years prevention. In support of this description, the work of sociologist Aaron Antonovsky on resilience was cited. Antonovsky said that understanding the development of people's sense of coherence – their ability to understand their life, manage it, and see it as worthwhile – is necessary. We, furthermore, cannot expect health behaviour change when individuals feel the challenge to change is not worthwhile.

10. Participants had, nevertheless, divided views on arguments for early, *early*, intervention. For some, this would offer a welcome return to more reliance on the 'predictive skills' of less senior public service workers operating at community and neighbourhood levels. These skills were argued to be highly effective, borne of real-world experience and with which, it can be argued, the risks and costs are lower.

Other participants worried about the potential for early, *early* intervention to create, negative and self-fulfilling stereotyping or labeling of individuals or families. Concern was expressed by some participants about what they saw as the punitive labeling coming out during this forum discussion.

11. For some participants the father role was often the biggest influence on childhood development. These participants saw a need for more policy on intervention around fatherhood.
12. Other participants mentioned emerging evidence from the Scottish Government [play talk read](#) campaign that identified a need to target fathers in the next phase of the campaign.
13. Several participants argued that early intervention will not be easy in a time of public expenditure constraints and saw that it would need:
 - Fundamental change in policy and practice, with resources being moved from 'crisis-responding' and into early action that has less of an immediately obvious priority
 - Clear-sightedness, long term confidence and, above all, strong adaptive leadership

Early Years education and support

14. Some participants, with reference to other E.U. countries, argued that:
 - The start of education for UK schoolchildren was at too early an age
 - Early years nursery and education field workers were poorly paid and poorly qualified
 - In the UK, the poor quality and quantity of provision of under fives, pre-school, education with financial support, discourages mothers from entering the labour market

In response, it was pointed out that:

- At least one Equally Well test site was focusing on *Early Years* and exploring early developmental needs and school readiness
- On the child workforce skills, all managers of early years facilities are educated to degree level

- With regards to the preschool education, the 2007 [Scottish Government and CoSLA Concordat](#) stated that pre-school provision would be increased from 475 to 570 hours per annum for children aged three and four
15. Participants were asked ‘to be wary of a sense of individualising poverty’ and of fixing their focus only around vulnerable families and the individual. It was pointed out that, ‘we are talking about 21% of children in Scotland living in poverty. These issues must surely be broader and wider than [those] families that we would normally term to be vulnerable.’

Community Planning and community engagement

16. Community Planning Partnerships (CPPs) were described by a Scottish Government speaker as ‘very important in early intervention policy implementation because they assess local need and match framework policies’. It was pointed out that there was ‘a lot of support for CPPs’, with, for example, the Scottish Centre for Regeneration (SCR) [Learning Networks](#) for practitioners, and an impending initiative from the [Improvement Service in Scotland](#). There is also a [Learning Network for Equally Well](#).
17. Other participants highlighted scope for improvements in effective participation and meaningful engagement between CPP agency partners and stakeholders from the community and voluntary fields. Some participants perceived a widening gap with middle managers in statutory bodies having become gatekeepers and not facilitators. The need to change this was described as a key challenge. The change would be a decisive move away from top-down control and direction, and towards the transfer of responsibilities, assets and power to the discrete local level.
18. This change was, in turn, argued to be essential for the engagement of community and neighbourhood level organisations in early intervention.
19. For some participants the looming public expenditure reductions meant that many community-level services, such as early intervention, will *only* be viable with the empowerment and engagement of community and neighbourhood level organisations as delivery partners.

Part Two Plenary Presentations

Parts Two and Three provide a broad summary of the plenary presentations and real-time discussion. For practical purposes, and in the interest of producing an accessible paper, it was not possible to record the fullest detail and nuance of all matters discussed. Several elements will, necessarily, repeat points already summarised in Part One.

Chair’s opening remarks:

20. This forum on early intervention took place against a background of economic recession and continued unfair inequality in the UK. There are many authoritative commentaries on this situation, for example:

- The [March 2010 Anatomy of Economic Inequality in the UK](#). This was the report of the National Equality Panel set up by the U.K. Government. The Report confirmed that two of the fundamental drivers of poverty and poor health in U.K. society are unjustly inequitable life *chances* and life *circumstances*. The report stated that, 'Economic advantage and disadvantage reinforce themselves across the life cycle, and often on to the next generation. It matters more in Britain who your parents are than in many other countries'.
- Daniel Dorling in his newly published book on 'Injustice, *why social inequality persists*', illustrates how living in one of the most unequal advanced countries in the world – the UK – negatively impacts on most of it's population. He points out that 'Mixed anxiety and depression is the most common mental disorder in Britain'... and that... 'In Britain around a fifth of children have a mental health problem in any given year'... and then that... 'Rates of mental health problems reach increase as they [the children] reach adolescence'.
- Mike Foulis, Director of Housing and Regeneration in Scottish Government, stated at the 2010 SURF Annual Conference that the credit crunch and ensuing economic recession meant that, 'The property led regeneration model is now effectively broken...'.

These same sources, however, also provided confirmation of the effectiveness of public policy interventions and of options for further action:

- The National Equality Panel Report demonstrated and emphasised 'the importance of policy interventions' – and that – 'public policy can ensure that access to important aspects of life... does not depend on income... and thus that access is not effected by unjust inequalities'.
- In similar vein, Professor Dorling, in his book, restated that over time Britain and other societies throughout the world have made huge strides, through public policy and action, on matters of health and literacy. He laid out what he defined as the 'five faces of inequality'. The suggestion here is that if we can identify these faces of inequality then we know what to address.
- Whilst Mike Foulis argued that the present property-led regeneration model is broken – he equally argued that 'a new model is required...'. The Open Forum chair suggested that it can be argued that early intervention has to be a key component of any new model.

Elisabeth Campbell, Team Leader, Early Education and Childcare, Scottish Government Scottish Government

The following is a summary of some of the points made and issues raised by Elisabeth Campbell in her plenary presentation. She drew mainly on her involvement in the Scottish Government's *Early Years Framework*.

21. There is a widely held consensus that Scotland has long-term issues surrounding poverty and health inequalities and underachievement. To address these, the Scottish Government in the last couple years has produced three frameworks:

- *Equally Well* (2008) which is about tackling health inequalities
- *Achieving our Potential* (2008) which is about tackling poverty and income inequality
- The *Early Years Framework* (2009) which is about giving children the best start in life

22. The Scottish Government has fifteen top level objectives or National Outcomes. National Outcome five is that:

'our children will have the best start in life and are ready to succeed'.

The *Early Years Framework* contributes mainly to this outcome; but, arguably, the framework has some impact on all fifteen of the National Outcomes and a strong impact on at least seven of them.

23. The *Early Years Framework* states that:

'The period between pregnancy and three years (of a child's age) is increasingly seen as a critical period in shaping children's life chances, based on evidence of brain formation.'

This is supported by evidence-based findings from the likes of USA psychiatrist Bruce Perry. Perry demonstrates that brain development is 'front loaded' – that by the age of four, a child's brain is already 90% of that of a typical adult. Other research findings show that by the age of three, 50% of a child's language is in place.

24. This and other evidence confirms that deep-seated, lifetime, damage can be caused by deprivation, lack of nourishment etc. at this critical early stage – and that we cannot rely on existing education methodology and resources alone to correct such development impairment.

25. It's probable that almost all members of Scottish society would argue a moral imperative in seeking to address such issues. There is also, however, emerging international evidence for economic arguments in favour of early intervention.

26. One recent U.K. study charted how for every £1 invested in public expenditure in early years support, £7.10 is returned in terms of savings. These savings arise from the avoidance of later, more complex and expensive, interventions in matters of education, health and crime (punishment and rehabilitation) etc.

27. Collaboration was seen as vital for such success, and there has been significant investment by Scottish Government in promoting and supporting collaboration. For example, road shows that attracted circa 250 participants across Scotland. This activity resulted in some innovative outcomes. These included the development of East Renfrewshire Council's *Early Years* toolkit and a competency test on the intervention theme for their staff.
28. There are 'ten main elements for success' in the *Early Years* implementation plan, with collaboration as a vital element. It can be speculated what 'success' in early intervention will look like:
 - Better service delivery with more agreement on more outcomes
 - More collaboration
 - More sharing of resources
 - A clearer link to Single Outcome Agreements (SOAs) in CPPs
 - Better scrutiny of policy outcomes

Laura Ross, Social Inclusion Policy Officer, Scottish Government

The following is a summary of some of the points made and issues raised by Laura Ross in her plenary presentation. She drew on her involvement in the Scottish Government's *Achieving Our Potential* policy framework:

29. The key themes of the *Achieving Our Potential* framework are:
 - Tackling income inequality
 - Poverty and the drivers of low income in the long term
 - Supporting those who are currently living in poverty
 - Making the benefits/tax credits system work better
30. There is also a 'solidarity purpose target' in the framework:

'To increase overall income and the proportion of income earned by the three lowest income deciles as a group by 2017'.
31. There is a great diversity of people living in poverty in Scotland. This requires a diversity of interventions. The underlying key principles are a focus on prevention and a focus on risk identification. Early intervention gives practical effect to these principles through:
 - Action at different levels whether individual, family or community
 - Building capacity
 - Joint service delivery
 - Tailoring universal services to specific needs
32. Development of the current model of early intervention in Scotland was at a 'fairly early stage', with some identification of areas of success and concern.
33. CPPs are very important in policy implementation because they assess local need and match to national framework policies. There was, consequently, 'a lot of support for CPPs' with, for example, the Scottish Centre for Regeneration

(SCR) Learning Networks for practitioners. In addition, the Improvement Service in Scotland will be launching a capacity building initiative for local authorities later in 2010.

Karen Grieve, Programme Manager, Health Improvement & Health Inequalities, Scottish Government Scottish Government

The following is a summary of some of the points made and issues raised by Karen Grieve in her plenary presentation. She sought to frame the recent *Equally Well Report* and *Implementation Plan* in a regeneration context:

34. Action Points in the *Implementation Plan* were described as 'going upstream' into early years prevention. In support of this description, there is the work of sociologist Aaron Antonovsky on resilience. This had demonstrated that some people's early years experience led to a low sense of coherence, whereby people were unable to perceive of any personal place or 'worth' in their immediate life circumstances. Their over-arching need is for a life that they can see as manageable and in which they perceive themselves as 'worthwhile'.
35. Other external factors can be illustrated as having a significant impact on individuals. For example, the findings of USA public health expert Howard Frumkin on the impact of urban space on individuals' health and wellbeing were cited. It is in this context that Scottish Government will soon be launching a place-making tool to help users discuss the impact of place on health and make challenges to making local changes.
36. Significant ongoing learning work at various *Equally Well* test sites demonstrates that there is also extensive cross-over in policy and practice between *Equally Well* and other frameworks. An *Equally Well* panel has been constituted and three meetings have been coordinated by the Scottish Government Public Health Minister with an [updating report](#) imminent.

Tom Wood, Independent Panel Member; Special Adviser on Early Interventions, Capital City Partnership.

The following is a summary of some of the points made and issues raised by Tom Wood in his comments as an invited panel guest. He drew on his extensive public service career:

37. Tom Wood's strong argument was for what he described as early, *early*, intervention. He judged that most of the past and existing intervention practice in Scotland as having been based on 'statutory triggers'. These triggers responded too late – only after the problems and consequences of early problems had impacted on individuals, communities and society.
38. The overwhelming experience and evidence, he argued, is that once the damage is done to an individual in his or her early years, it becomes hugely expensive – and usually unsuccessful – to attempt to undo the damage and to rehabilitate or re-empower that individual in later life. He also pointed out that the resources for this old, centrally driven, later-intervention model, would anyway soon be no longer available in the unfolding UK economic and political environment.

39. He said that many practitioners and activists feel that middle managers in statutory bodies have become gatekeepers and not facilitators. He felt there needed to be a decisive move away from top-down control and direction, and towards the transfer of responsibilities, assets and power to the discrete local level.
40. An important corollary to this need for change is that early, *early* intervention would require substantial and fundamental transference of powers and responsibilities back to the very local, to the neighbourhood, level.
41. He asserted that there is untapped potential in early intervention for quick, simple solutions or 'fixes', when, it can be argued, the risks and costs are lower. But he identified two problems or barriers to this approach:
- The first problem is 'the absence of the connecting piece' - the piece 'below the radar' at the neighbourhood services level. A common scenario can be described as being where 'people are drifting into trouble' in a neighbourhood, whilst in the next street or so there was a neighbourhood level supporting service - but there was no very-local level connecting of the two.
 - The second problem is structural or institutional. For many practitioners and activists, development of the SOA approach with CPPs, has vested all the key powers in statutory services. The need is for significant and sustained structural and culture change. This should start within public services agencies – including at local authority level.

Part Three Summary of Open Discussion Session

42. Participants offered differing responses to the arguments for early, *early*, intervention. Responses also different to the associated argument that professionals and community activists at the community or neighbourhood level have honed predictive skills when it comes to early identification of vulnerable individuals and households:
- Some supporters of early, *early*, intervention felt that there had been a long-term downgrading and lack of investment in public services professionals and other workers at the neighbourhood and community levels. This, it was argued, had caused a damaging loss of respect for, and investment in, the discreet and experienced 'early warning' skills of such workers (these skills were referred to above as 'predictive skills').
 - Other participants were concerned about the potential for early, *early*, intervention to create negative and self-fulfilling stereotyping or labeling of individuals or families. One participant drew on experience with early intervention in Scandinavia where it is extensively

employed and well-executed. He cautioned, however, that in his opinion some of the Scandinavian institutional environments are insular, authoritarian.

- Many participants were keen to promote the perspective of individuals and families that are experiencing problems, exclusion and inequity as those who need support. This was as opposed to a perspective that labelled them, variously, as dysfunctional, deviant, or offenders who required statutory intervention. This perspective was seen as often favouring intervention that is punitive in intent, or that is about blaming the individual person.
- One forum participant is the chief executive of a major Scottish charity in the field. This participant asked other participants 'to be wary of a sense of individualising poverty' and of 'fixing their focus only around vulnerable families and the individual'. The participant pointed out that, 'we are talking about 21% of children in Scotland living in poverty. These issues must surely be broader and wider than (those) families that we would normally term to be vulnerable'.
- Research by Save the Children was cited by as demonstrating that in the U.K. the children in most poverty lived in households where the parents or carers were in and out of work. This was typically not a life on benefits, rather it was *a life of transitions in and out of work*. the researchers concluded that it is those *transitions* that make those children some of the poorest in society.

43. The challenge of achieving changes in behavior and lifestyles was raised by several participants. There was widespread acceptance among participants on the ineffectiveness of many earlier public health campaigns. This was again argued to be caused by an over-reliance on statutory triggers that were activated only once the consequences and impacts on the individual and society have occurred. It was further argued that anyone seeking to change the lifestyles and damaging behaviours of target clients had to also contend with the materialism and selfish individualism in our consumer society.

44. Participants voiced a general understanding that early intervention is not easy. This was, not least, because in the real world of public resources allocation, it's hard to take services away from crisis-responding and move them to other areas. These other areas, like early intervention, might by definition be seen as having a less urgent priority.

Participants agreed that this resource re-allocation required clear-sightedness, long-term confidence and, above all, strong adaptive leadership.

45. One participant referred back to the evidence in the plenary presentation on the formation of a child's brain and coupled this with the fact that in the UK, the school starting age is the lowest in Europe. The participant also asserted that there is 'a lot of evidence in Europe' that the starting age of four to five is too early and children are not ready emotionally to interact.

A Scottish Government speaker pointed out that workers at the *Equally Well* test site in East Midlothian are working with national experts around the idea of school readiness. They are building on a model from Canada, which is based in turn on a model of early assessment looking at children's needs, and their readiness at various stages.

46. Some participants, with reference to other E.U. countries, argued that:
- The start of education for UK schoolchildren was at too early an age
 - Early years nursery and education field workers were poorly paid and poorly qualified
 - In the UK, the poor quality and quantity of provision of under fives, pre-school, education with financial support, discourages mothers from entering the labour market

In response, it was pointed out that:

- That at least one *Early Years* test site was hosting an examination of childhood school readiness
- On the child workforce skills, all managers of early years facilities are educated to degree level
- With regards to the preschool education, the 2007 [Scottish Government and CoSLA Concordat](#) stated a minimum provision that would increase to 570 hours for a child aged three to four

A Scottish Government speaker, with regards to pre school education before the age of three, surmised that at the moment the Scottish Government view is that there is not yet sufficient evidence that there is a need for pre-school education under that age - but that this it is something that Scottish Government 'are aware of', and if further evidence does show a huge benefit then the Scottish Government will review the relevant policies.

47. There were arguments from participants for more awareness of the fatherhood role and a more positive focus on it – especially in the context of the intergenerational circles noted in the presentations. A participant identified the father role as sometimes the biggest influence on children but noted that 'we don't have any specific interventions (policy) on that', and that, 'childcare work is marked by is gender segregation, it is 98% female'.
48. Other participants mentioned emerging evidence from the Scottish Government's *play talk read* campaign, which identified a need to target fathers in the next campaign. The theme of fathers had also been picked up in some of the *Equally Well* test sites, for example at Musselburgh and in development work in Edinburgh.

49. Feedback based on real-life practical experience around early intervention was offered by some participants. For example, one was a community development worker over 20 years, most recently in a neighbourhood of acute deprivation, and another working in a Routes to Work intermediary organisation. They argued that in what was called the 'realities in the real world', much current policy and decision-making will have the opposite effect to much of what was being described as needed at this forum for the development of early intervention.

An example cited was the recent decision in Glasgow to halve the staffing in Community Health and Community Health & Care Partnerships, and the enduring constraints of short-termism and annuality in public funding.

Another example given was the flow of authoritative evidence from the likes of the GoWell project in Glasgow arguing strongly for a replenishment of denuded community development – with the participant arguing that, based on past experience, this evidence was unlikely to be heeded by policy-makers.

50. Other participants in support of this view pointed out that innumerable community and neighbourhood networks are actually in place now - everything from football clubs to community centres to Mother and toddler groups. These were described as resources that can be deployed in partnership to deliver early intervention – or early, *early*, intervention. The same participants supported the argument that there is, 'this huge [community activists] network, which is being crushed, and which we undervalue because in the last 20 years there has been a tremendous tendency to professionalise things'.

For some participants, these comments verified the relevance of the comments from Tom Wood about the need for leadership, particularly within local authorities, to drive change - away from top-down control and 'gate keeping', and towards devolving and divesting responsibilities and resources to community level organisations and workers. For several participants the need was for investment in leaders, rather than risk-averse managers.

51. There were accompanying arguments for investment in; 'The most effective people that actually made a difference to people's lives were homemakers, who were like unqualified social workers... and they knew all the families and they did practical things, like teaching mothers how to make meals, how to balance the family books, basic things.'

Discussion was brought to a close at this point with all participants showing their appreciation for the input of the speakers and panel guest. Individual participants were encouraged by the plenary Chair to get in touch with SURF if they had any further thoughts or contributions that they wished to make on the subject matter for the day. The Chair, meantime, invited all participants were to join their hosts SURF and SCR for an informal networking lunch where they could continue their discussions and exchanges.

Further Information: Speaker presentation slides, a bibliography paper of suggested further reading and a delegates list is available from the SURF website (link below). A shorter Summary Paper is also available.

Link: <http://www.scotregen.co.uk/knowledge/events.asp?sid=9>

Background to the Forum: SURF delivers a national programme of regeneration networking activities with the aim of offering its networking service to all regeneration practitioners and interested parties across Scotland. This networking activity is funded by the Scottish Government's Scottish Centre for Regeneration. SURF will continue to act as an independent facilitator, bringing together key players, and producing constructive Outcome Papers to help inform policy decision-making and practice. For any clarification or additional information, contact Edward Harkins at SURF. Telephone 0141-585 6850 or email [edward\(at\)scotregen.co.uk](mailto:edward(at)scotregen.co.uk).

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