



## **Insurrection, inspiration and operation: Implementing the right to health: NHS Health Scotland's Story**

**Public Health England Annual Conference 12<sup>th</sup> September 2018**

### **Who are NHS Health Scotland?**

NHS Health Scotland is a Scottish health board, leading nationally on public health improvement and the reduction of health inequalities. Our vision is a Scotland in which all of our people and communities have a fairer share of the opportunities, resources and confidence to live longer, healthier lives. We have been working towards this vision since 2012 and our strategic priorities are set out in our Strategic Framework for Action, 'A Fairer Healthier Scotland 2017–22'.

### **How and why did we get involved in human rights?**

Health inequalities (differentials in life expectancy and differentials in health outcomes) are an indication that not everyone in Scotland is enjoying their right to the highest attainable standard of health.

We have therefore found the Right to Health agenda and the public health agendas to reduce health inequalities and improve health to be naturally compatible. Indeed, we believe a Human Rights Based Approach (HRBA) adds weight and (potential) legality to our inequalities focus.

NHS Health Scotland's interpretation of a HRBA has been developing for several years. We have been working with the Scottish Human Rights Commission and others to support implementation of Scotland's first National Action Plan on Human Rights since 2010. The Right to Health and taking a HRBA have been an explicit statement of our strategic intent since 2017. We see this as a progressive, cultural approach. We have sought to embed human rights concepts and practice through our leadership, communications, strategy, planning and ways of working with staff, resources and projects. Our current

business plan includes 15 outputs with a specific theme on the Right to Health.

## What is the policy context in Scotland?

NHS Health Scotland supports public health policy, strategy and practice being explicit about the Right to Health and we are enthusiastic about the potential incorporation of Economic Cultural and Social Rights (ECSR) into Scottish legislation because:

- The 1948 UN Declaration of Economic Cultural and Social Rights (ECSR), in its coverage of the Right to Health and other rights such as Right to an Adequate Standard of Living and Right to Adequate Housing, provides a natural, international framework for public health. General Comment No 14 advocates specifically for states to have a public health strategy and system that is based on human rights.
- Even without the legal basis, human rights language lends itself to strong and powerful policy messages. Re-framing the (negative) need to reduce inequalities in health to the (positive) context of working to realise the right to the best possible standard of health for all can be a useful policy position.

There is a favourable climate for human rights policy in Scotland:

- The First Minister of Scotland has commissioned a Leadership Group to make recommendations on if, and then how, incorporation of international human rights conventions (notably ECSR) into domestic law could be achieved.
- Several examples of Scottish policy relating to health and the underlying determinants of health are now framed, at least in general terms, in the language of rights.
- We have been encouraged by strong interest in our work from the Scottish Faculty of Public Health and the UK Public Health Network.
- There is potential to create the new national public health body, Public Health Scotland, as a rights-based organisation from day one.

## What have we done so far to promote the Right to Health and progress a HRBA?

- Supported the Scottish National Action Plan for Human Rights (SNAP) since its foundations in 2010, as co-convenor of the national Action Group for rights in Health and Social Care, in partnership with the Health and Social Care Alliance (national third sector intermediary body).
- Included the Right to Health explicitly within our 2017–2022 Strategic Framework, A Fairer Healthier Scotland.
- Published and disseminated briefings on the link between inequalities and the Right to Health.

- Consistently included the Right to Health in our policy consultation responses, with some influence and effect. We have found the PANEL framework particularly useful in this regard.
- Built the Right to Health into programmes aimed at transforming public services so that those responsible for commissioning, managing and delivering public services have an increased understanding of how to plan and deliver them in order to protect the right to health. Examples include:
  - hosting a Scottish Branch of the Faculty of Homeless and Inclusion Health
  - health and rights influence on Roughsleeping and Homelessness policy
  - promoting a rights based approach to palliative care
- Shared evidence on a HRBA at Scottish Parliament and participated in/shared learning through a range of networks including the UK Public Health Network.
- Organised a Right to Health seminar with the Director General of Health and Social Care and his leadership team in Scottish Government.
- Sponsored the development of a Peer Research Collective with the Strathclyde University Health Policy Unit. This has gathered findings on the right to health and access to health and social care services from the perspective of people experiencing homelessness and asylum seeking women. The research has now moved on to focus on barriers for people with convictions or within justice.
- Influenced our research practice to help see the opportunities in taking a HRBA e.g. AAAQ is a useful framework to help determine what our research could add to what we already know about public health and there is the opportunity to develop mechanisms for a wide range of perspectives – such as lived experience – to be genuinely influential in the design and implementation of research.
- Progressed a HRBA as an organisational cultural issue e.g. embedding a rights based approach to staff wellbeing through organisational change.
- Used improvement methodology to try and understand better how human rights and the right to health link with our work to reduce health inequalities.

### **What has helped us so far to promote the Right to Health and take a HRBA?**

- A favourable political climate.
- Buy in from our Chair and Board.
- A corporate strategy that started from an implicit rights-based perspective (everyone in Scotland having the opportunity to live healthier lives) and is now explicitly rights-based.
- We have found PANEL to be particularly useful in, for example, framing consultation responses and in explaining the concept of human rights to staff and stakeholders.

- Having critical friends and strong partnerships in the third sector, including the Scottish Human Rights Commission.

### What has hindered us?

- This is not yet a mainstream health approach – our strongest allegiances are in the third sector.
- Limited opportunities to benchmark to other public health organisations testing similar approaches
- There is still insufficient accountability – particularly of service providers – to provide services that are accessible, available, appropriate and of high quality (AAAQ).
- We're still struggling to implement a HRBA to public health at local level and to show demonstrable change. Barriers include: the complexity of funding cycles and reality of financial pressures; the stage of local health and social care integration and how this impacts on budget coordination; the local leverage around preventative spend when under national pressure to deliver.

### What opportunities are coming up next?

- The network of leaders in Scotland who are trying out approaches such as HRBA and HRBB (Human Rights Based Budgeting) is expanding.
- The next version of the Scottish National Action Plan for Human Rights is being developed and we are closely involved.
- Scottish Government have begun an improvement project on human rights and training programme for civil servants.
- In 2019, NHS Health Scotland will become part of the new national body, Public Health Scotland. There are many opportunities to influence the establishment of Public Health Scotland so that it takes a progressive approach to the right to health from the outset. For example:
  - Framing the vision and first strategy of Public Health Scotland in explicit Right to Health terms, across all the domains of public health.
  - Building human rights into the governance structure e.g. recruiting lived experience and expertise on human rights onto the Board.
  - Developing mechanisms within the operation of the body (for example governance, research) for a wide range of perspectives - such as lived experience – to be genuinely influential in strategic and operational decision making. This would fulfill two of the PANEL principles - Participation and Empowerment - and go some way towards the Accountability principle.

## How can I find out more?

- [www.healthscotland.scot/health-inequalities/the-right-to-health](http://www.healthscotland.scot/health-inequalities/the-right-to-health)
- [www.healthscotland.scot](http://www.healthscotland.scot)
- [www.scottishhumanrights.com/scotlands-national-action-plan](http://www.scottishhumanrights.com/scotlands-national-action-plan)
- [www.alliance-scotland.org.uk](http://www.alliance-scotland.org.uk) (key partner)
- [www.scottishhumanrights.com](http://www.scottishhumanrights.com) (key partner)

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