Written submission from NHS Health Scotland

Thank you for the opportunity to contribute to your consideration of the Land Reform (Scotland) Bill 2015. The focus of this response is Part 5: Right to buy land to further sustainable development.

NHS Health Scotland is a national health board working with public, private and third sector organisations to reduce health inequalities and improve health. Our role is to work with others to put into action knowledge about what works, and does not work, to reduce health inequalities and improve health. Our 2012–17 corporate strategy ‘A Fairer Healthier Scotland’ sets out our vision of 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.

Health inequalities are unfair and avoidable differences in people’s health across social groups and between different population groups. Compared to our western European neighbours, the population of Scotland suffers the worst health outcomes.¹ Within Scotland, a marked social gradient between the most and least privileged can be seen; the lower a person’s social position, the worse health they are liable to experience.² For example, people living in the most deprived areas are more than three times more likely to die prematurely compared to those living in the least deprived areas.² Health inequalities occur, largely, as a consequence of social inequalities, in particular the unequal access to resources such as power, status and income.³, ⁴

Land is an important resource.⁵ Land ownership confers a measure of political, social and economic power to the owner.⁶ The potential redistribution of land, through the mechanisms proposed in the Land Reform (Scotland) Bill is a possible instrument to change the balance of power between individual property owners and communities.⁷ Although there is a lack of evidence of the impact of land reform in Western countries, several case studies, where Scottish land has transferred to community ownership, have highlighted a number of potential benefits.⁸ For example, community ownership of land in rural areas has enabled investment in local resources as well as the development of social housing and renewable energy schemes, which in turn have helped to increase population and school numbers. Intangible benefits identified included communities developing confidence to make decisions and becoming more proactive and future focused.⁹, ¹⁰ It is not known whether the experiences of community ownership of rural land will be replicated in urban contexts.

The case studies highlighted the skills that community bodies required to buy and manage land along with the challenges they have faced. Confidence and determination were needed prior to purchase as well as practical skills in administration and finance. Project management skills along with legal and financial competence were required post-purchase. External connections were considered vital to complement the skills available within the communities.⁹ Challenges included the management of conflicting viewpoints within the community, capacity issues where there was heavy reliance on volunteers and achieving a balance between securing financial returns to be sustainable and delivering benefits for the community.⁹, ¹¹
There seems to be a presumption in the proposed right for community bodies to buy land that all communities are equally placed to benefit. However, the resources needed to facilitate community purchase and management of land may be distributed unevenly between communities. Affluent communities are likely to have better access to the range of technical, specialist and managerial skills as well as valuable external connections. Thus, there is a possibility that inequalities between communities may be reinforced if disadvantaged communities are not offered training, guidance and support to take advantage of the opportunities to purchase and manage land. Equally, inequalities may be created and/or maintained within a community, if the proposed development of the land benefits and/or excludes a particular population group.

NHS Health Scotland would welcome the addition of consideration of the likely effect of granting or not granting the request to transfer land on inequalities, including health inequalities, in part 5, section 47 (10) in a similar way that inequalities of outcome resulting from socio-economic disadvantage are part of decision-making considerations for asset transfers in the Community Empowerment (Scotland) Bill 2015 (p16, section 55 (3ca)). In particular, NHS Health Scotland would encourage the application of Health Inequalities Impact Assessments (HIIA) http://www.healthscotland.com/equalities/hiiia/index.aspx

References


