

**PE1924/E: Scottish Human Rights Commission submission dated 2 November 2022**

Pam Dudek  
Chief Executive  
NHS Highland

31 October 2022

**WOMEN'S HEALTHCARE IN THE HIGHLANDS**

Dear Ms Dudek,

The Scottish Human Rights Commission (SHRC) is Scotland's National Human Rights Institution with a statutory duty to promote and protect human rights in Scotland, including the right to the highest attainable standard of health.

The Commission has received reports from individuals in Caithness and Sutherland who are concerned about the centralisation of women's healthcare, in particular gynaecological services, leading to lengthy road trips to Inverness, sometimes involving overnight stays. In addition, some individuals have questioned the quality of gynaecological care that they have received at Raigmore hospital.

The right to health is an internationally recognised right to which the UK has committed to comply with by adhering itself to the International Covenant on Economic, Social and Cultural Rights and the European Social Charter.

Under human rights standards, for health services and policies to be considered adequate they need to be accessible. This implies that they need to be both physically and financially accessible. In particular:

- Physically accessible requires for services to be within safe physical reach for all sections of the population, especially vulnerable or marginalised groups, such as women, ethnic minorities, children and young people, older persons, and persons with disabilities, among others.
- Financially accessible requires for health services to be affordable for all. This includes ensuring that everyone, and particularly those most vulnerable, do not incur unaffordable expenses in order to access medical services, such as through the payment of fees, accommodation, and transport. c

In addition to the accessibility requirements, for services to be considered adequate under human rights terms, they need to be of good quality. In particular, this means that services need to be medically and scientifically appropriate, ensuring skilled medical personnel are available.

I understand that there are significant financial constraints on public services in Scotland and that there is a balance to be struck between local access and centralised provision. However, given the concerns expressed by some women in accessing healthcare in Caithness and Sutherland, the Commission would like to hear your views on how the accessibility criteria as a component of the right to health is impacted by centralised provision. In particular, can you advise whether a human rights based analysis has been carried out to determine the impact on women in these regions?

For example, we are interested in understanding the impact on women whose pregnancies are low-risk and their ability to access adequate services locally. We are also interested in the situation of high-risk patients and whether it is appropriate that they be expected to travel to Raigmore Hospital for treatment? Are you able to share data on the still birth rate in the region and whether that has significantly improved with the centralisation of service? I would be grateful for any information or data that you are able to share.

The Commission wishes to engage constructively with you in order to provide support through guidance and/or capacity building to ensure that the provision of health services in the Highlands takes a human rights based approach.

Yours sincerely,

Ian Duddy Chair, Scottish Human Rights Commission

cc: Humza Yousaf, Cabinet Secretary for Health and Social Care