

Cross-Party Group on Improving Scotland's Health

Wednesday 7 June, 12:30-13:45, online

Summary

Present

MSPs

Brian Whittle MSP (Chair)

Graham Simpson MSP

Foysoil Choudhury MSP

Invited guests

Alan Miller, Professor of Human Rights Law, University of Strathclyde

Pete Ritchie, Executive Director, Nourish Scotland

Nason Maani, Lecturer in Inequalities and Global Health Policy, University of Edinburgh

Non-MSP Group Members

Manira Ahman, Public Health Scotland

Karen Barton, University of Abertay

Tom Bennett, Scottish Recovery Consortium

Annafleur Broekman, NHS Lothian

Annie Brown, Patchwork Recovery Community

Christina Buckton, Public Health Scotland

Ruth Campbell, BDA Scotland Board

Jeff Collin, University of Edinburgh

Emilie Combet, University of Glasgow

Emma Crawshaw, Crew 2000 Scotland

Jacqueline Cunningham, REHIS

Alan Dalziel, ASH Scotland

Alison Douglas, Alcohol Focus Scotland

Sheila Duffy, ASH Scotland

Sioned Ellis, Diabetes Scotland

Helen Forrest, Children's Health Scotland

Jennifer Forsyth, Obesity Action Scotland

Kenny Harrison, Argyll & Bute Council

Claire Hislop, Public Health Scotland

Elinor Jayne, SHAAP

Colwyn Jones, Dentist

Harpreet Kohli, SHAAP

Fiona Lockett, Fife Health & Social Care Partnership

Nick Harleigh-Bell, Alcohol Focus Scotland
Sancha Martin, University of Edinburgh
Ian McCall, Paths for All
Rebecca McColl, Alcohol Focus Scotland
Robert McGeachy, Food Standards Scotland
Robert Norrie, NHS Fife
Nicola Paul, ASH Scotland
Helen Reilly, QNIS
Bushra Riaz, Nourish Scotland
Alice Sherwood, NHS Ayrshire and Arran
Rebecca Sibbett, Alcohol Focus Scotland
Claire Stevens, VHS
Alexandra Taylor, Alcohol Focus Scotland

Apologies

Joe FitzPatrick MSP
Karen Keeley, REHIS
Emilia Crighton, NHS GGC
Andy MacGregor, Scottish Centre for Social Research
Niamh Fitzgerald, University of Stirling
Jonathan Sher

Agenda item 1: Welcome from co-convenor Brian Whittle MSP:

Brian Whittle MSP (BH) welcomed attendees and outlined the agenda, noting the role of the CPG in bringing together a variety of stakeholders from different fields, from MSPs to public health organisations, service providers, academics and representatives of local community organisations. He highlighted the need to redouble our efforts on public health prevention, commenting on ill-health being the biggest drag on the Scottish economy.

Agenda item 2: Attending MSPs introduced and apologies noted in meeting minutes

BW welcomed **Graham Simpson MSP (GS)** and **Foysoil Choudhury MSP (FC)** to the meeting. Apologies were noted in the meeting minutes, as above.

Agenda item 3: Approval of Wednesday 01/03/23 meeting minutes and any matters arising

BW asked for someone to propose and second approving the minutes. **Pete Ritchie (PR)** proposed approving the minutes, and **Colwyn Jones (CJ)** seconded their approval. The group unanimously approved the previous meeting minutes with no amendments.

Agenda item 4: Topic discussion and presentations: People and planet: a human rights based approach to public health.

BW introduced the topic, explaining that the group would explore the intersection between people and environmental issues as a topical concern. The framing of human rights is very much a live debate at the UN level.

BW introduce **Alan Miller (AM)**, Professor of Human Rights Law at the University of Strathclyde. **AM** began his presentation by explaining his expertise lay not in public health but in adopting a human rights-based approach to law and policy. **AM** mentioned the upcoming public consultation paper on a Human Rights Bill in Scotland, based on recommendations from the National Taskforce for Human Rights Leadership. The proposed bill would seek to incorporate four UN treaties into Scottish law, with a focus on the International Covenant on Economic, Social and Cultural Rights, which included the right to the highest attainable standard of physical and mental health.

AM emphasized that the bill would address the social determinants of health and the right to an adequate standard of living. He highlighted the relevance of these rights in addressing the state of health and well-being in Scotland, especially in light of the inequalities exposed during the COVID-19 pandemic. He mentioned the UN's call for all countries to prioritize economic, social, and environmental rights in their COVID recovery efforts.

The proposed bill would also incorporate other treaties, such as the Convention on the Rights of Persons with Disabilities, the Convention for the Elimination of All Forms of Racial Discrimination, and the Convention for the Elimination of All Forms of Discrimination Against Women. Additionally, a right to a healthy environment, recognized by the UN General Assembly, would be included. **AM** emphasized that the bill would represent a significant step forward for Scotland's human rights journey and was relevant to the current times.

AM discussed his involvement in developing a human rights-based toolkit for UN country teams worldwide to link human rights obligations with the Sustainable Development Goals. He emphasised the timely nature of the current discussion and expressed optimism about the progress that can be made.

AM then provided an example of the practical application of a human rights-based approach in Scotland's public health sector. He described his role in leading the National Collaborative focused on addressing drugs and alcohol-related deaths. **AM** explained that the approach taken aimed to involve individuals affected by substance use in the design, delivery, and regulation of support services. He highlighted the importance of addressing power imbalances, cultural issues, and stigma associated with substance use. The process involved developing a Charter of Rights for all people affected by substance use, based on the right to health and other rights which will be outlined in the human rights bill. An implementation

framework would guide service providers, health professionals, and decision-makers in effectively implementing the bill and realising the right to health and addressing social determinants.

AM concluded by discussing the UN principles of a human rights-based approach and the FAIR model, which emphasises gathering **F**acts, **A**nalysing rights, **I**dentifying actions, and **R**eviewing progress. He reiterated the significance of ensuring the voices, experiences, and rights of those affected by substance use are considered in collaboration with service providers and healthcare professionals.

Overall, **AM** emphasized the importance of a human rights-based approach in addressing public health issues, particularly in Scotland, and expressed optimism about the progress that can be achieved through the proposed Human Rights Bill.

BW thanked **AM** for his input and introduced **Pete Ritchie (PR)**, Executive Director of Nourish Scotland.

PR began his presentation by describing how Nourish Scotland had been actively advocating for the right to food to be incorporated into Scots law for the past decade. He noted that the upcoming Human Rights Act would include provisions regarding food, as it is crucial for realizing various other rights outlined in the Good Food Nation bill. Poor dietary health not only hinders progress and causes significant suffering, as evidenced during the COVID-19 pandemic, but also results in premature deaths and reduced quality of life. Therefore, ensuring access to the right food is of paramount importance.

The concept of dignity is central to Nourish Scotland's work, and they were delighted that the Scottish Government's recent paper on ending the need for food banks places dignity at its core. Nourish Scotland had been focusing on this aspect for several years. They aim to explore how to measure the delivery of the right to food, and in this regard, they undertook a project over the past couple of years to provide specific examples.

The project utilized the Availability, Accessibility, Acceptability and Quality (AAAQ) framework, with support from UN special rapporteurs Olivier de Schutter, Hilal Elver, and Michael Fakhri, who had been following Scotland's journey toward realizing the right to food. The project aimed to determine what "adequate" means in the context of contemporary Scotland and to understand what it takes for individuals and families to sustain themselves throughout the week. The Good Food Nation bill emphasised that food should bring pride, pleasure, and a sense of community, extending beyond mere sustenance.

The project employed a co-production approach, involving volunteers who had first-hand experience with shopping, preparing, and consuming food in Scotland. The focus was on creating families representing typical households, considering their preferences, hobbies, and financial situations. The project examined meal plans, healthy aspirations, weekly

shopping lists, and the enjoyment and healthiness of the food consumed. It sought to strike a balance between fitting with people's lives, being enjoyable, and meeting nutritional requirements, rather than imposing a top-down approach.

The project revealed that kitchen skills were not a problem among the families involved, but time constraints often hindered their ability to share meals and adhere to healthier diets. Special occasions were seen as significant for fostering human dignity, as they provided an opportunity to invite neighbours and friends to share food. While the families' food choices did not perfectly align with government dietary recommendations, they leaned toward more fruits, vegetables, and fibre, with fewer sugars but slightly more fat and saturated fat. The project also examined the affordability of these food choices and found that the cost of a typical weekly shopping list had increased by 28% in the past year and a half, exacerbating the challenge of accessing nutritious food.

Moving forward, Nourish Scotland planned to replicate the project with different food cultures and specific dietary needs, while also incorporating sustainability considerations. They aim to develop rights-based indicators in collaboration with relevant organizations and further refine their methodology to measure the right to food in diverse contexts.

BW thanked **PR** for his input and introduced **Nason Maani (NM)**, Lecturer in Inequalities and Global Health Policy at the University of Edinburgh.

NM began by highlighting that the commercial determinants of health is discussed as being a counterpoint to empowerment and advancing human rights. While health is often associated with doctors, clinics, and treatments, it is actually shaped to a large extent by external factors such as our physical and social environments, access to opportunities, income, and social networks. These wider forces are influenced not only by government policies and individuals but also by commercial forces, giving rise to the field of commercial determinants of health.

Commercial determinants of health are factors that influence health and arise from a motive to increase profit. They have the power to exert significant political, economic, and socio-cultural influence on environments, thus affecting health and health inequalities. Examples of commercial actors shaping our environments include tobacco, alcohol, ultra-processed foods, and fossil fuels, which contribute to a third of global preventable deaths through pollution, consumption, and harmful products.

Understanding the commercial determinants of health is crucial for informing policies and addressing conflicts of interest. Research in this area helps evaluate the direct and indirect impacts of commercial activity on health. It also aids in assessing the health effects of Corporate Social Responsibility initiatives and predicting opposition to evidence-informed regulation.

NM highlighted the extent of efforts made by commercial interests to oppose public health policies. Internal documents from tobacco companies reveal their tactics, such as creating controversy and doubt around their products, and using third-party organizations to influence debates, and undermining public health initiatives. The leaked documents also expose how the tobacco industry was aware of the harms caused by their products but prioritised profit and sought to protect their interests.

Similar parallels can be seen in other industries, including the food and beverage sector, fossil fuel companies, and firearm manufacturers, where strategies like disputing links to harm, gendered marketing, and individual responsibility arguments are employed.

To address the issue of the commercial determinants of health, it is essential to recognize the diverse nature of commercial activity and the strategies used by conflicted actors. While not all businesses are detrimental to health, it is crucial to remain honest, evidence-informed, and vigilant in identifying engagements that have positive effects on health and equity and those that unquestionably harm them.

NM concluded by explaining how international bodies like the World Trade Organization were working on developing tools and processes to protect policy development from vested interests. It is important for policymakers and academics to understand the nuances and avoid equating being pro-health with being anti-business, while also being aware of the potential harm caused by certain industries and their influence on public health.

BW thanked **NM** for his presentation and thanked all the speakers again.

Agenda item 5: CPG conflict of interest policy

It was agreed the Secretariat would arrange a meeting with co-Conveners to review the operation of the conflict of interest policy with a view to further discussion at a future CPG.

Agenda item 6: Launch of ASH Scotland: Celebrating 50 years of Action on Smoking in Health

Sheila Duffy (SD), CEO of ASH Scotland indicated that Professor Mike Daube and Professor Emily Banks would be visiting Scotland on Wednesday the 28th and Thursday the 29th of June. Professor Daube was involved in setting up ASH in the UK, which is now four independent UK ASH organisations. He was an early medical director and has been instrumental in Australia's policy on tobacco. Professor Emily Banks is a world expert on epidemiology and public health and wrote the evidence base reviews for e-cigarettes. **SD** shared that ASH Scotland would be organising various events that may be of interest to the CPG membership, including ASH Scotland talks, a series of conversations about tobacco control, including with Professor Daube and Professor Banks, which are now available on [YouTube](#) and [Spotify](#). CPG members can subscribe for notifications of new episodes, or follow the pages on Twitter, Facebook and Instagram.

Agenda item 7: Any Other Business

There was no other business.

BW ended the meeting by thanking the speakers for their presentations and participants for their questions.

CPG members will be notified of the date of the next meeting by email.

END