



**OFFICIAL REPORT**  
AITHISG OIFIGEIL

# Equalities, Human Rights and Civil Justice Committee

**Tuesday 18 November 2025**

**Session 6**



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**Tuesday 18 November 2025**

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**EQUALITIES, HUMAN RIGHTS AND CIVIL JUSTICE COMMITTEE**  
**26<sup>th</sup> Meeting 2025, Session 6**

**CONVENER**

\*Karen Adam (Banffshire and Buchan Coast) (SNP)

**DEPUTY CONVENER**

\*Maggie Chapman (North East Scotland) (Green)

**COMMITTEE MEMBERS**

\*Pam Gosal (West Scotland) (Con)

\*Rhoda Grant (Highlands and Islands) (Lab)

\*Paul McLennan (East Lothian) (SNP)

\*Marie McNair (Clydebank and Milngavie) (SNP)

\*Tess White (North East Scotland) (Con)

\*attended

**THE FOLLOWING ALSO PARTICIPATED:**

Juliana Amaral (Borders Community Action)

Wendy Hand (Voluntary Action Shetland)

Kirsty Harding (Highland Third Sector Interface)

Megan MacInnes (Community Land Scotland)

Artemis Pana (Scottish Rural Action)

Alasdair Ross (Aberdeenshire Voluntary Action)

Sheena Stewart (Uist Council of Voluntary Organisations)

Alan Webb (Third Sector Dumfries and Galloway)

Dr Luis F Yanes (Scottish Human Rights Commission)

**CLERK TO THE COMMITTEE**

Euan Donald

**LOCATION**

The James Clerk Maxwell Room (CR4)



**Scottish Parliament**  
**Equalities, Human Rights and**  
**Civil Justice Committee**

*Tuesday 18 November 2025*

*[The Convener opened the meeting at 09:31]*

**Decision on Taking Business in**  
**Private**

**The Convener (Karen Adam):** Good morning, and welcome to the 26th meeting in 2025 of the Equalities, Human Rights and Civil Justice Committee. We have received no apologies this morning.

Our first agenda item is a decision on whether to take items 3, 4 and 5 in private. Item 3 is consideration of a work programme paper, item 4 is consideration of a paper on the European Union law tracker and item 5 is consideration of the evidence that the committee will take this morning on its inquiry into human rights, equalities, and access to services in rural areas of Scotland. Do members agree to take those items in private?

**Members** *indicated agreement.*

**Human Rights, Equalities and**  
**Access to Services (Rural Areas)**

09:32

**The Convener:** Our second item this morning is an evidence-taking session for our inquiry into human rights, equalities and access to services in rural areas of Scotland. This is our first formal evidence session in the inquiry.

Last week, we began our work on the inquiry with a visit to Blairgowrie. It was an informative and helpful visit that put us in a great position to start off today. I thank all those who met us last Monday. I also thank, in particular, Third Sector Interface (Perth and Kinross) for organising the day for us. It was very well put together—thank you so much.

Today's session will have a round-table format. I would like to open up the conversation by asking everyone around the table and online to introduce themselves. I will start.

I am the MSP for Banffshire and Buchan Coast and the convener of the committee. I hand over to Rhoda Grant, who is on my left.

**Rhoda Grant (Highlands and Islands) (Lab):** Can I ask about—

**The Convener:** We are just introducing ourselves.

**Rhoda Grant:** Sorry. I was away in a dwam—I am not awake yet. *[Laughter.]*

I am a Labour MSP for the Highlands and Islands region.

**Dr Luis F Yanes (Scottish Human Rights Commission):** I am the economic, social and cultural rights lead at the Scottish Human Rights Commission.

**Paul McLennan (East Lothian) (SNP):** I am the MSP for East Lothian. I was previously a councillor in East Lothian. I was also the Minister for Housing for a couple of years, until June this year.

**Tess White (North East Scotland) (Con):** I am an MSP for the North East Scotland region. As people know, we have huge rural areas in Aberdeenshire and Angus.

**Kirsty Harding (Highland Third Sector Interface):** Hi, everyone. I am senior development officer for policy and membership at the Highland Third Sector Interface, which is based just outside Inverness.

**Juliana Amaral (Borders Community Action):** Good morning. I am the chief executive officer at

Borders Community Action, which is the third sector interface in the Scottish Borders.

**Pam Gosal (West Scotland) (Con):** Good morning, everybody. I am a member of the Scottish Parliament for the West Scotland region.

**Alan Webb (Third Sector Dumfries and Galloway):** Good morning, everyone. I am the chief executive at Third Sector Dumfries and Galloway.

**Maggie Chapman (North East Scotland) (Green):** Good morning, everyone. I am a Scottish Green MSP for the North East Scotland region.

**The Convener:** We move to our online witnesses.

**Wendy Hand (Voluntary Action Shetland):** I am from Voluntary Action Shetland, which is the TSI in Shetland.

**Megan MacInnes (Community Land Scotland):** Good morning, everybody. I am a board member of Community Land Scotland. I join you from Applecross in the north-west Highlands, where I am also the development manager of the local environment trust.

**Artemis Pana (Scottish Rural Action):** Hi, everybody. I am national co-ordinator of Scottish Rural Action, and I live on the Isle of Raasay in the Highland Council area.

**Alasdair Ross (Aberdeenshire Voluntary Action):** Good morning. I am the policy and consultations officer for Aberdeenshire Voluntary Action, which is the third sector interface for Aberdeenshire.

**Sheena Stewart (Uist Council of Voluntary Organisations):** Hello. I am chief officer with Uist Council of Voluntary Organisations, which is a partner in TSI Western Isles. I am also the current chair of TSI Western Isles.

**The Convener:** You are all very welcome. Thank you for joining us this morning.

We are going to go straight into the conversation. We have some themes to explore, and the first theme is access to services. The first question comes from Rhoda Grant.

**Rhoda Grant:** What are biggest barriers to access to services, especially health services? I know that that is a big question.

**Juliana Amaral:** There are significant barriers to access to services in the Scottish Borders. Transport in rural communities is a challenge, as we all know. That, combined with the geography of the region and the spread of the population, poses significant barriers not only to access to services but to participation in community life. It is an on-going concern.

The centralisation of services—expecting people to travel to a service rather than the service going to where people are—and the on-going pressure on public budgets pose the significant risk that people will be excluded in terms of the accessibility of services. That particularly affects an older population and people with disabilities.

Even those who are lucky enough to live in areas with transport networks find that there are accessibility issues in terms of public access to services, because there is less transport infrastructure even where such a network exists. Across the rural Scottish Borders, most people live in settlements and villages that are outside transport routes. If you do not own a car and do not have the means to get to a bus stop, which is the case for disabled and older people, that is a significant challenge.

On top of that, there are costs associated with living in rural communities such as those in the Scottish Borders. Most families need to own a car. That poses additional challenges and puts financial pressures on them in comparison with those who live in urban areas. It is estimated that the cost associated with owning a vehicle is an additional £50 a week, which is a significant challenge for those living in the rural Scottish Borders.

My concern is about older people and people with disabilities in particular. There are pockets of good provision, such as door-to-door community transport, but more infrastructure, support and funding for such services need to be considered if we are talking about equality and using the available resources across the third sector to fill gaps where we know there are pressures on public service provision.

**Alasdair Ross:** My colleague explained the difficulties with transport. What we see in Aberdeenshire is seen across Scotland: local public services are being hollowed out. Local government is being hollowed out; rural nurseries, schools, community hospitals and libraries are all being closed; and choice is being taken away—the option of doing something local is being completely taken away. Therefore, accessing services becomes impossible for some people.

Car ownership in Aberdeenshire is very high—for those who can afford it—and even if public transport exists, it can be extraordinarily expensive. For instance, it costs more than £20 a day to travel to Aberdeen and back from Mintlaw, which is 30 miles from Aberdeen and has a population of nearly 3,000 people.

Those are some small examples of how difficult it is. Choice and options are being taken away from people.

**Sheena Stewart:** Juliana Amaral and Alasdair Ross have already highlighted the issues around public transport. Certainly, in an island community such as ours, transport is being eroded all the time. The money from the public purse for the community transport services that run is ever decreasing. That has an impact on third sector providers, which often run public transport services—they are having to cut services, which has a huge impact on access to services.

I know that we will talk about healthcare later, but I highlight the issue of transport in accessing healthcare. People often have to travel from Uist and Barra up to Stornoway to access healthcare appointments. That can mean a 200-mile round trip and is often by plane. That is not fit for purpose. The flight that goes from Benbecula to Stornoway is a limited service and is often hampered by bad weather, which causes a lack of trust. Patients then have to travel on the ferry, often leaving home at 6 am for the 200-mile round trip. Older people and patients who are unwell who have to travel that way often do not have their own transport and rely on taxis. They are picked up very early in the morning to get to a ferry that will take an hour, and then there is another hour-and-a-half trip from the other side in Harris up to Stornoway to the main hospital there. That could be for a short appointment, but people are often not fit to be travelling that way. We need a better transport system, with flights that enable patients to get to those appointments. Transport issues hugely hamper accessibility.

I was talking to someone who travelled yesterday to have an operation this morning. They went up in a very small plane from Benbecula to Stornoway. They needed support from someone who works for Highlands and Islands Airport Ltd and another cancer patient to haul her out of the plane, as she put it. That was undignified, to say the least. That is the reality of the situation that we find ourselves in here in Uist and Barra.

**Megan MacInnes:** Community Land Scotland and its members would echo what the others have already said.

I will say a few words about some other dimensions of the issue. The results of the Scottish Human Rights Commission's report show that the impact of rurality on accessing economic, social and cultural rights is real. Those of us who live in sparsely populated areas feel as if we are being penalised in accessing those rights because of where we are.

We also see a shrinkage in the delivery of public services to our communities. Here in Applecross, we have had to step in and provide a community transport service because there is no other functioning transport service. That has had a huge, positive impact on young children and

young adults in particular and in enabling them to access cultural and sporting events and educational activities that otherwise they would be completely prevented from joining.

I also want to mention at this stage the interconnectedness of all of this. We are seeing real problems in having key workers come to communities such as Applecross to provide social care services, for example. That is a huge issue at the moment. A lot of that is to do with the lack of housing, which relates to underlying issues around lack of availability of land and so on.

That interconnectedness between all the different issues and challenges as a result of living in sparsely populated areas and rurality is something that Community Land Scotland would like to highlight.

09:45

**Kirsty Harding:** Everything I say will echo what others have said. We cover the whole of Highland, an area that Rhoda Grant obviously knows very well. It is a land mass the size of Belgium, and sometimes we underestimate the challenges that come with that.

Transport is a huge issue, and the further we go in time, the more we seem to centralise in Inverness, especially in medical services such as maternity services. If you are a mum having your first child, there is a lot of encouragement to travel to Inverness to do that. That causes problems for the people going to Inverness—whether the partner come along, how they get there and how expensive it is to stay there. Inverness is an expensive place to stay these days: there is a lot of tourism now, so Airbnbs are becoming more prevalent and prices are going up.

Another challenge is how long it takes to get anywhere. One example we often use is that if someone lives in Durness and wants to use public transport to go south, the furthest they can get in one day is Tain. They can stay in Tain for 20 minutes, and then they have to get on the bus to go back. That is the furthest someone can get.

Obviously, a lot of places also involve ferry rides to get to. I travelled over to Strontian last week, and it was £12 each way on the ferry. Therefore, cost also becomes a big issue.

We get around a lot of the challenges, and loads of great community transport organisations pop up. However, they depend first on funding, which is often difficult—as we know, there is a constant cycle of searching for it. They also depend on the volunteers to drive the cars or minibuses, which takes us into challenges related to the ages of people to drive minibuses—if they passed their

test after 1997, they cannot do that on their licence.

There is lots of good work happening, with good people trying to help, but there are loads of challenges as well.

**Alan Webb:** I agree with what many of my colleagues have said, particularly on transport.

In Dumfries and Galloway, we have recently had a public transport review, particularly on our buses. That was designed to build more sustainability into the system for providers but, in fact, it has reduced the number of services. Even more of our villages no longer have a bus connection at all. There was a story widely covered in the press a few weeks ago about the single bus service for one of our villages that takes people into town and leaves town five minutes after it arrives, so they do not have time to do anything while they are there.

Rather than repeating some of the comments colleagues have made, I will comment about access and services and the way they are integrated and planned for. For example, we have stories of people with caring responsibilities and carers who give up time that they should be spending to go to their own appointments, because the infrastructure to provide support for the person they are caring for is not available whilst they are absent.

I also mention the time that it takes overall in the system, which Kirsty Harding has alluded to. In an urban area, someone might go to a half-hour health appointment, for example, and expect to take a couple of hours out of their day. In rural Scotland, someone can expect to eliminate their whole day by the time they get there and back and all the navigating they have to do.

On access to services more broadly—not just, as Juliana Amaral has mentioned, on the centralisation or central provision of some services—there is a wider question for us in rural areas about whether many of the things we need to access, or the support we need, need to be services at all. That is an active conversation we are having in Dumfries and Galloway. The vast majority of our public sector services have some assessment process or waiting list to access. That is indicative of whether we are properly thinking about community response to local needs, rather than relying on expensive services all the time.

Let me use community transport as an example. A tiny amount in the scale of public sector budgets—tens of thousands of pounds—is invested into some community transport providers. Last year, those providers alone provided over 1,000 health patient journeys. Therefore, we are not talking about millions of pounds investment in infrastructure; we are talking about tens or

hundreds of thousands of pounds of investment into communities to come up with their own solutions. At the moment, it feels like we are doing neither: we are not providing accessible, integrated public services, nor are we providing the infrastructure to help people navigate, so we are stuck in the middle.

Our response in Dumfries and Galloway is that the likely answer is investment in communities to find their own way. We have tried redesigning public services for many years and have not quite managed it. Instead, we are looking at what happens when we invest in communities for them to take ownership of what they want to access and how they support each other, for example—which leans less into the infrastructure and more into place-based working.

**Wendy Hand:** A lot of what has already been said is similar for Shetland.

From a health point of view, most services are centralised in Lerwick for the hospital, although we have local doctor surgeries. For a lot of the doctors' services, we can now have telephone calls, which can be useful for some appointments. Appointments are limited, which is frustrating for a lot of people, and access to them really depends on where they live.

For a lot of our services, we have to go to Aberdeen. As was said, for hospital appointments—which can sometimes be a less than half an hour—that is a day out. People have to fly or get the boat the night before to Aberdeen. They are then sat in the hospital for some time, before getting transport back to either the flight or the boat.

For appointments, the fact that someone is flying in or coming in on the boat is not always thought about. That can sometimes be an issue. There can also be delays or cancellation of flights, so someone might go over for the day and end up being stuck overnight, which can happen with weather, technical issues or whatever it might be.

There are also people going to Aberdeen for cancer treatment, for example, who are feeling bad and have to sit in an airport waiting for flights, which is difficult. I know that more cancer treatment is happening in Shetland, so the situation is getting better.

The higher costs for people through having to have cars was mentioned. We also have the issue that our fuel is always more expensive—our petrol is more expensive than on the mainland. When I go over to mainland Scotland, I always have a good look at how much the petrol costs. There is always that pence difference, so it is costing us more.

Many buses come into Lerwick first thing in the morning—for people who work in Lerwick—and go out at the end of the day, and there is nothing else in between. That can be difficult.

We have an ageing population, which is becoming more of an issue. That then has an impact on the question of who is delivering the services. As I think somebody else said, one of the issues is housing. We struggle—particularly for care and medical staff and in teaching—to get people to come here because we do not have the housing available. The other issue we have is that, although our housing association is trying to build houses, we do not have the contractors—and we do not have the accommodation to have contractors come. It is a real catch-22 situation from that point of view.

We have a lot of voluntary organisations in Shetland—I think that we are the highest rated for volunteers per head of population. However, that pool is limited, and lots of people wear lots of hats. People are working more, so it is getting harder to provide services for people during the working day.

However, I will give a couple of positives. We have linked with the national health service and Royal Voluntary Service to trial a service with the north isles—which is two ferries away—to bring people to appointments. Previously, the NHS was using taxis for the whole service, and the costs were ridiculous. Working particularly with the eye clinic, we are doing a little test and linking with transport. The eye clinic speaks to transport to arrange appointments, so it is not a case of someone having to fit with the appointment they get. That is working well now, and we also have somebody with a minibus who is going and picking people up from the north isles.

Again, that means a day away for the individuals. I am not sure how we could change that or take an eye clinic to the north isles, but the trial is helping people to access appointments a little more easily, and it is better on the public purse. We are trialling that approach with one service and seeing how it could be expanded.

We also have local hubs that bring together lots of services. We have sessions for information, and different services can go along to the hubs, around wellbeing as well. They have been going for a few years now, and they seem to be working well.

I just thought that I would put a couple of positives in there, too.

**The Convener:** Thank you, Wendy. We still have two other people who would like to come in on this question. After that, we will have to move on because we have a lot more questions to get through.

**Artemis Pana:** I agree with Wendy—it is great to hear some of the solutions as well as some of the problems.

I will not repeat anything colleagues have said but raise a related issue. In the healthcare system, it is not just our choice and options—as Alasdair Ross eloquently put it—that are being taken away; it is also our access to justice. The Scottish Human Rights Commission's report evidenced a damning picture of complaint systems being hard to access, resulting in the penalisation of the complainant rather than the service provider.

Scottish Rural Action's experience is that those issues are not the only ones with complaint and redress systems. Even more damaging is the purposeful design of the complaints or redress systems so that they obscure the true nature and prevalence of issues.

In other words, if 100 complaints or concerns are raised by people or organisations across different parts of rural and island Scotland relating to the same kind of service provision or product within health boards, those complaints are rarely aggregated. In fact, they are purposely kept atomised. They are treated like local problems arising from local circumstances raised by people who are derogatorily labelled as people with too much time on their hands, when, in fact, the issues being raised are of national significance.

If we can address the challenges in the complaint systems, we will stop shooting ourselves in the foot. If we are masking the nature and prevalence of a national problem, we are also masking the solutions.

**The Convener:** Thank you.

**Dr Yanes:** I want to pick up on two dimensions, as the question about biggest barriers can be seen at an individual level and at a structural, systemic level.

We have talked a lot about the individual level: what is the biggest barrier as a rights holder accessing a service? That can be transport or another of the different things we have discussed. From the perspective of international human rights law, services need to be accessible, which means both physically and financially accessible. One consideration that we see over and over in the evidence is that services that are free—so we think they are affordable because they are free—are not affordable. That often has to do with the physical accessibility and the policies on the support for transport.

It might be that someone gets a medical appointment that is free and they are well tended for, but they have to cover the cost in a way that is minimum compared to the actual costs around it. What we hear as evidence over and over is that

people decide not to go to the hospital, for example, because they might lose out on a day of work or they might not be able to pay for the return ticket to and from Inverness, Glasgow or Edinburgh. That is important: we have to understand that, even though we have a free set of services, it does not necessarily mean that we have affordable services. That relates to barriers on an individual level.

10:00

I also want to pick up on what is happening at a structural level, which I think is important for the committee to reflect on. At a structural level, we are seeing a lack of localised policy making or flexibility in both our legislation and our policies. That means that, at times, services are being delivered in a way that does not fit the realities of what the community needs. Sometimes even the service provider—which might be the local authority or the NHS—knows that it does not work, wants to change and fix it, and is not able to do that because there is either a national policy on which there is no flexibility from Scottish Government or of a piece of legislation formulated by Parliament that does not allow flexibility.

Another layer of the biggest barrier in accessing services is that we have created policies without a real, human rights-based approach. There is little participation or input from rural communities in some of the ways we deliver services. That means that they do not work, and communities knew they were not going to work. The result is that, at the end of the day, they do not work because there has been very little input from the rural communities that know best what will serve them and what will work for their own context.

**The Convener:** Thank you. We now move to questions from Tess White.

**Tess White:** I found those answers very interesting, so thank you to everyone.

I will ask about general practitioner services. Has access to a GP got better or worse over the past 10 years? Juliana Amaral is nodding—would you like to go first?

**Juliana Amaral:** It is a hard question. We go back to the centralisation of the medical model, moving away from local communities. Across the Scottish Borders over the past 10 years, we have seen the local GPs—who were well-known and embedded in communities and neighbourhoods—disappearing. Some practices have closed, and some have combined with others. In essence, the local model is less and less available to people in communities.

In the Scottish Borders, for example, we are an ageing population. I know that that is in line with

the trend across Scotland, but in the Scottish Borders specifically it is estimated that the region is 10 to 20 years above the average of ageing. That poses significant risks for those who are prone to need support.

This goes back to Dr Yanes's point. With the lack of local provision in communities, we are seeing issues that could have been prevented becoming crises, and then more need for acute services as part of a central model, rather than a preventive approach in which issues are picked up by the local GP.

We understand the pressures on services and the need to think of different models. Equally, we need to think of different ways of delivery, where communities are at the heart of the decisions, and look at policies that will enable local authorities and the NHS to think about how the levers in the system allow for flexibility.

The current model is a downstream, not upstream, intervention. Therefore, year after year—with the ageing population, for example, in the Scottish Borders—we will be looking at cutting services because we are not meeting the demand, unless we start thinking strategically about preventive models in local communities.

My colleague Alan Webb mentioned the value of the third sector in prevention and early intervention. Those kinds of solutions could be part of the fabric of the discussions, but that requires strategic thinking and complete co-design of services with communities and the third sector at the heart. We also need to pay attention to good models: we have heard already in this room about a few models that can prevent and work as a buffer before the clinical medical model is needed.

I do not know whether I have the full answer to your question. Of course, we have seen a reduction and closures of medical GP practices over the years, but with that change needs to come further thinking and innovation about how communities can continue to be served in ways that meet their needs—not through a firefighting model, but through prevention and early intervention, working alongside the third sector as part of the solution.

**Tess White:** You have confirmed what the British Medical Association is saying—that there is a sustainability crisis in GP services and practices. Would anybody else like to answer?

**Wendy Hand:** I would say that GP services are less accessible. There are fewer appointments available—or there is the feeling that there are—than in the past 10 years. However, some of them are providing more services. I know that my local service does some physio and some counselling at a local level, which is useful.

I mentioned earlier the greater use of telephone appointments, so people are getting an appointment. They may not be getting a face-to-face appointment, but not everything needs to be face to face.

I cannot remember what it is called, but there is the online service that our doctors have. From 7 o'clock in the morning, you can go online and say what your issue is—

**Tess White:** It is called eConsult.

**Wendy Hand:** Something like that, yes. You go online and you put in what your issue is, and the doctors can then get back to you if needed. However, the time slot for that is very tight. If you are not up and online at 7 o'clock, you have had it.

The other issue is that we have a lot of locums here. That means we do not always see the same doctor at the surgery, so we have to explain ourselves over and over. That obviously can get quite frustrating and can be an issue.

Another issue is we have a lot of temporary workers up here, with the oil industry and other things. Obviously, that puts another strain on the health services, although that is more on the hospital and accident and emergency department.

We have a lot of cruise ships come in, and they can bring with them a lot of issues. I heard recently of people coming off the cruise ships and going straight to A and E, so that is another strain.

That is it at the moment.

**Alan Webb:** I would agree with the comment around sustainability; that is a worry.

In Dumfries and Galloway, it is certainly a patchwork. For example, in more populated areas, people wait longer to see a GP, but I know that, in my area, if I were to call my GP practice today, I would be speaking to the GP within a few hours and, if I needed to be seen, I would likely be there this afternoon or tomorrow. Good GP and general medical services are available, but there is not consistency and equity across Scotland, and access, particularly in populated areas, is quite difficult.

In Dumfries and Galloway, we are seeing examples of surgeries closing—GPs retiring and leaving. That creates an increased demand for the local health board, as it places pressure on the board to manage the practices and find others to support access.

There are questions about GPs—how we train GPs and where they need to be based—but there are great examples across Scotland of how we tackle the demand. We have a traditional health system that has been around for a while that responds to need, but we have seen a lot of examples of multidisciplinary models.

For example, again in Dumfries and Galloway, some home visits for regular checks are conducted by paramedics rather than placing demands on GPs' time. Paramedics then report their findings to the GPs, who are still in control and making decisions about the care. I suppose that it is a question of building relationships and trust with the public so they know that they do not always need to see the GP—the GP is not always the best person to address a particular need.

I think that there is an issue in us building what I call health confidence, which is knowing yourself, knowing what is good for you and what is not right for you, and then where best you can access the right care. The traditional system of going into primary care—into the GP—and then being referred out does not really fit the complex health needs that we have, particularly in our rural communities.

Therefore, there are examples of where services are working well. I am less inclined to say the answer is just more GPs; there needs to be a genuine look at an accessible health system. A rebuilding is also needed, certainly post-pandemic, of health confidence. We have access to some great online resources—at NHS Inform and elsewhere—so we do not necessarily need to put a demand on the service.

To respond to the question directly, sustainability is an issue caused by a traditional, linear system of how we access health care, which I do not think is what meets our needs now.

**Tess White:** Thank you. I think that the point that you and Wendy Hand made about looking at the systemic model, and the point about a peak of additional workers and—she mentioned the cruise ships—holidaymakers, particularly in the summer months, are not factored in.

Shall I go to my next question, convener?

**The Convener:** Artemis Pana would like to come in.

**Artemis Pana:** Wendy Hand stole my thunder in making the point about the seasonal fluctuation of demand on GP surgeries, but I want to draw your attention to the excellent no doctor no village campaign that took place in Ireland from 2016 to 2018. That was not just incredibly successful in raising awareness in Ireland of the vitality of health care services; it also influenced the way that Scotland thinks about the issues.

One good thing that resulted out of the campaign—and out of the lived expertise of rural communities—is the need not necessarily for more GPs but for more generalism in health care services. At the moment, a lot of medical professionals are pushed down the ultra-specialism path, but that is not what rural and

island communities need. We need good generalists—good GPs and good senior nurse practitioners—who can do a lot of different things, enjoy the work they do and live a good life where they choose to live.

**Tess White:** I will go on to my next question, which is on ambulance waiting times for rural areas. I know that it is a huge issue in parts of Aberdeenshire. Does anybody have any views on the ambulance waiting times for rural areas? Are they getting better or worse?

**Alasdair Ross:** I do not know whether the situation is getting better or worse, but we hear some horror stories in Aberdeenshire for sure. A few of us spoke about transport earlier, but what if you need it in an absolute emergency and no one comes?

We have heard of very long waiting times in Aberdeenshire and in the communities that are furthest away from accident and emergency services. Braemar is a good example that is often talked about as a community that is fending for itself in emergency times. I do not know whether times are getting better or worse, but there is certainly a huge issue and a huge concern for people. I have heard a few times people saying, “Just don’t get ill.”

Minor injury units in Aberdeenshire have closed as well. Even if someone has something that is not life-threatening—getting stitches, for example—they are facing huge distances and a huge amount of time, when they might have been able to access that more locally until the last few years.

I hope that is helpful.

**Tess White:** That is really helpful. I know that we will get a submission to the committee from Aberdeenshire from one of the councillors and through the integration joint board.

10:15

**Juliana Amaral:** This discussion has made me think about my own experience. I am a volunteer coast guard, and what we have seen in terms of good models in emergency services around the coast is a multidisciplinary, interagency approach.

Only yesterday there was a situation in Peebles at the mountain bike trail, and it was volunteers from the mountain rescue who supported the initial immediate response, allowing time for the paramedics and the ambulance to arrive. The person was airlifted to the hospital.

We are seeing good models where organisations are working alongside emergency care and the Fire and Rescue Service but also volunteers in the community—Scottish Mountain

Rescue, Water Rescue Scotland, coastguards and the lifeboats.

Good models are there in communities; my point is to highlight the significant value and effort from volunteers in that work. Of course, we must be careful that volunteers are respected for the time that they offer to communities, but there are good models in that multidisciplinary approach. When resourced well and supported, those interventions can be part of the response to the significant challenges and pressures in public service delivery.

In answer to your question, we are seeing good models that provide support. Resilient teams are another model: people are trained to be a first responder, particularly in rural, very isolated communities, and allow ambulance services, for example, to get to an individual in time.

**Tess White:** That is really helpful.

**Dr Yanes:** We have not found enough evidence to say in absolute terms whether the situation is getting worse or not, but two things are important that we have found in our work at the SHRC.

First, it is clear from our evidence that we do not have enough during specific times of the year. That comes back to the points made by Wendy Hand and Artemis Pana on the influx from tourism during summer months. That is not just in ambulances; it is in a wide range of services that have been designed for a population but not, for example, for Shetland receiving 9,000 persons in a single day in two cruise ships. There is no capacity to respond to that influx, so that puts a big strain on the general responsiveness of ambulance and other services. The services have not been tailored enough—there is not an increase in ambulance services during the summer months, for example.

The second aspect relates to ambulance cars, where there are already strong commitments. For example, in Sutherland, because of lack of connectivity, someone might be able to get an ambulance car for a non-emergency appointment. That is clear from NHS Highland guidance. However, if someone were to call the call centre for an ambulance car, they would usually be denied, because the call centre workers do not understand that that is the policy commitment.

Therefore, there is oftentimes frustration between what has been agreed by the institution and, at times, a lack of training of the front-line person to deliver the service in a way that has been agreed for the rural community. That is often a tension in relation to how advancements are not really operationalised on a day-to-day basis because people are not trained enough to respond to rural needs.

**Tess White:** Thank you—that is very helpful.

**Pam Gosal:** Good morning, panel, and thank you for all the information that you have provided so far. We know that housing shortages are a significant issue in rural communities. The best way to combat shortages is to build new homes but, year after year, the Scottish Government falls short of what is needed to tackle growing homelessness levels—the latest statistics show that house building completions are down by about 6 per cent on the previous year.

Our rural communities face unique challenges that we do not normally see in urban areas, such as a lack of infrastructure, logistical hurdles and complex planning and affordability issues. At the same time, many homes in rural areas are old and poorly insulated, so they are prone to damp, mould and expensive heating costs. It is little wonder that there is rural depopulation—there is a depopulation crisis in rural areas.

What should the Scottish Government be doing better to ensure that rural communities are no longer overlooked, especially when it comes to housing?

**Alan Webb:** Thank you for the question. There are a couple of angles. First, I absolutely agree that it is a challenge to get the volume of house building that is needed, because there are hurdles to get over in planning and so on. A real-life example from Dumfries and Galloway most recently is that a social landlord that had committed to house building was no longer able to do that, which presents a challenge for sustainability. When a long-term strategic plan for housing is put together, so many aspects need to come into play but, by the time it comes to delivery, the world has changed. That was a perfect example of a commitment that could no longer be delivered. There are also practical issues about where homes are and about infrastructure, which you mentioned.

When I was preparing for this meeting, a story was shared with me about a mum with young children who was waiting for housing. The only available home was in a rural village, and she has been moved there with her family, because the priority is to be housed, but she has no easy access to the childcare, services and training that she needs to get to work.

Even when we address housing issues not by building but by finding homes for people in the current situation, we find that there is a lack of structure around where people are housed and, I imagine, that no thought is put into the process, certainly through how the system operates. When considering housing a mum with young children in a rural village, thought is needed about how she is expected to access schooling and everything else

and get her children to where they need to be. That issue really is a challenge.

Your main point was on depopulation, which we talk about a lot. My view is certainly that tackling repopulating our rural areas is one of the overarching commitments that we need to have in order to drive other levers, including housing, health services and community-based responses. Unless we are committed to repopulating our rural communities, we will only ever be managing decline on the basis of forecasting services and infrastructure for a declining population.

In Dumfries and Galloway, we have a housing plan and a combined strategy. That looks good, but nobody thinks that it is going fast enough. In our area, we need greater investment in local infrastructure, particularly to support social landlords—not just big commercial house builders—to build homes in the places where we need them.

In addressing homelessness and housing issues, we need to understand the infrastructure that is needed where we place people; otherwise, as in the example that I gave, we might move a family to a place where they are even more isolated than they were before, even though they have a roof over their head. In fixing one issue, we could create five more.

**Pam Gosal:** Thank you for that information. When I was a member of the Local Government, Housing and Planning Committee, I spoke to local authorities. They said that costs—especially from ferries going back and forth—and planning issues stop developers building houses in rural areas. When somebody builds a house in an urban area, accessibility of materials is quite good, but taking materials across on ferries is a lot harder. How can the Government incentivise house builders more?

I will touch on what you said about not thinking about housing on its own but looking at the full infrastructure. What could the Government do better? Our committee looks at the budgets and sees that different departments cover quality and other areas. How could they work better?

**Alan Webb:** If that is directed at me, I will say first that housing is not my specialist area. However, given that the housing plan in Dumfries and Galloway is about leaning into social landlords, I suggest that that is where support is needed. I hope that my colleagues agree with me.

Our area will never be attractive to big commercial house building, because the developments that are needed would never be like that. We will never have the volume or the capacity of an urban area, so we need investment in smaller builders and an understanding that, although the costs of building are higher and the

infrastructure is more expensive to put in place, this is a long-term investment in the repopulation that we talked about.

Another aspect, which I did not cover in responding to your earlier questions, is the cost of fuel to heat older homes. We have pretty successful—but, unfortunately, very small scale—third sector partnership responses to help people with heating their homes, finding more cost-effective ways to heat their homes, insulating their homes and finding techniques to keep the heat in their homes, for example.

Our approach is to have very small investment projects, tests and trials that involve tens of thousands of pounds. What we could do in Dumfries and Galloway is invest a few hundred thousand pounds to roll out such measures across the board, which would make heating cheaper for people in the homes that they are in, before we even looked to the homes that we need to build. I did not want to miss the opportunity to comment on that.

It needs to be recognised that rural areas will not achieve economies of scale in house building, so we need investment in smaller developments and the infrastructure around them.

**The Convener:** We have quite a bit of interest in answering the question.

**Megan MacInnes:** I thank Pam Gosal for her question, which raises a critical area where communities in rural areas are facing major struggles. Community Land Scotland sees our members—community landowners—stepping in to play a key role in providing affordable homes in rural areas. That is a good example of how community landowners are stepping in to provide greater access to economic, social, and cultural rights across the board.

As Alan Webb said, the reason is that rural areas in the Highlands and Islands do not have large-scale housing developers meeting the need for affordable homes and do not have registered social landlords providing those homes. The burden of delivering affordable homes therefore very much falls on the shoulders of community landowners and local development trusts. Interesting research about that has been published as a result of the Scottish Land Commission's work on rural housing, if the committee would like to look at that.

Community Land Scotland would very much agree with the conclusions of the SHRC's report. My experience is that the challenges around security of tenure, affordability, habitability, fuel poverty and location are all contributing to an affordable housing crisis in Applecross, across the west coast of the Highlands and in island areas.

In our area, for example, 50 per cent of the housing stock is short-term lets and social housing. When a housing needs assessment was done here recently, 15 per cent of the respondents to our housing needs survey said that they were considering leaving the area because of a lack of available affordable homes. That is double the proportion of the local community that said that in our previous survey.

That is a good example of how affordable housing is not just about a lack of homes; it is about the very viability of rural communities. If you do not stem the depopulation trend, there will not be enough working-age adults to support the continued provision of social care and all the other public services that the ageing demographics in such communities will need in the future.

The question of location is critical. Across the Highland area, from rural communities, we see the reverse of what Alan Webb described—we see homes being built in and around population centres such as Portree, Ullapool and Inverness, whereas affordable homes are not being delivered at scale in the way that is needed in local areas.

Pam Gosal asked what the Government can do to address the situation and what recommendations the committee can make. We support the SHRC's recommendations, but there is a bit too much focus on the Government's existing action plans—to be frank, they have not yet led to any significant change on the ground.

I draw the committee's attention to well-documented work across other sectors, particularly around the community-led housing sector, about what is needed to help community groups step up and deliver affordable homes in the areas where those homes are needed. Work is needed, for example, on the availability of land because, if you do not have the land, you cannot build the houses. That relates to immediate access to land, but we also need to connect this conversation with the wider discussion about the broader land reform agenda and the need to tackle the increasing concentration of land ownership in rural areas, which is preventing building on land.

10:30

Another issue, which has been raised, is the cost per unit built for affordable housing, which is a significant challenge. We are dealing with that now in Applecross in our project to deliver affordable homes, but it is recognised across the sector.

One of the key discussions and key areas where the Government could intervene more is in committing to extending and increasing the funding that is available for community groups through the rural and islands housing fund and to

providing community groups with greater support to navigate planning processes, which have become increasingly difficult following the national planning framework 4.

The community-led housing alliance was recently launched; it brings together the views of community-led housing groups from across Scotland to think about what is needed from their perspective as the deliverers of affordable homes across rural areas.

From our perspective, the final part of the puzzle is thinking about the duty bearers who are responsible for improving access to the right to housing as being not just local authorities or even registered social landlords but other non-state actors, such as large-scale landowners in rural areas that have the land but are not stepping up yet to deliver affordable housing on that land and ensure the viability of those rural communities.

In connection with wider land reform discussions, the committee could look at what is in the “Scottish Land Rights and Responsibilities Statement 2022”, which says that owning land not only gives you rights but gives you responsibilities, which extend to doing what you can as a landowner to deliver and support wider access to economic, social and cultural rights, including the right to housing.

**The Convener:** Thank you. I note that we have a little bit more interest in this question, but I ask everyone to be more succinct because we are running out of time and we have quite a bit to get through. I do not want to stifle any discussion—your contributions have been really great and helpful—but I ask everyone to be mindful of the time.

We will go to Sheena Stewart and then Alasdair Ross.

**Sheena Stewart:** Thank you. I will try to be very brief. As Megan MacInnes highlighted, the solution does not only involve building new houses—although there is a need for that—but is about making the existing housing fit for purpose.

In island communities such as the one that I live in, many of the houses were built before the 1980s, so many of them do not have insulation, which means that they are hard to heat. There are some grants available for putting insulation in, but they are often means tested and many people cannot access them. When the heating source is switched off, those houses get cold very quickly, and families are spending much of their salary or pension on heating.

The 2024 “Affordable Warmth at Home in the Western Isles” report, which was commissioned by Tighean Innse Gall, found that more than 80 per cent of the households in the Western Isles spend

more than 10 per cent of their income on heating, and 50 per cent of households spend 20 per cent. The Western Isles have some of the highest levels of fuel poverty in Scotland, so ways must be found to help to make those houses fit for purpose, such as through the provision of grants.

I will highlight some of the fuel costs. A lot of the houses in Uist and across the Western Isles have oil central heating. We pay 81.5p per litre for domestic heating, compared with the Scottish average of around 61p. In the 1980s and 1990s, when grants were available, many people got rid of other heating sources and put in oil central heating, because at that time oil cost something like 17p per litre. That just shows how things have changed.

There is an issue with depopulation in rural areas of the Western Isles, as is the case in many other areas, and you asked what the Scottish Government might be able to do to help with regard to housing. The Government has its social housing investment programme, but money from that is spent on social housing on the outskirts of large towns in the north of the region, such as Stornoway, because it is cheaper to build houses in those areas, and very little of that money is being spent in the south, because the further south that you go, the higher the cost of building houses. There needs to be more flexibility in terms of how the SHIP money can be spent, so that the needs of different communities can be taken into account and a bespoke approach can be taken, depending on how rural they are.

There should also be an uplift in croft house grants, self-build loans and so on, as not everyone wants social housing. Since Covid, the cost of building has rocketed, especially in the more rural areas, so a lot of families just cannot afford to build houses now. There must be investment in approaches such as shared equity and rent-to-buy schemes. If that does not happen, the crisis in care that we already face will get worse. We are trying to keep families in the region and attract new families and people of working age, because 25.2 per cent of our population is retired, and it looks like that number will rise to 28.8 per cent by 2032.

I have raised a lot of issues but I am aware that other people want to come in, so I will leave it at that.

**Alasdair Ross:** I want to make a quick point about the affordable housing contributions that are required of developers. Local authorities prefer neatly packaged delivery of affordable homes in certain sites, but that is not always what is appropriate in rural communities. What we find in Aberdeenshire is that, often, new housing developments are not situated close to town centres, services or transport links, and that the

affordable housing that is built by those developments is in an area where people in those homes cannot live the life that they would want. For example, near where I live, affordable housing is being built beside houses worth £500,000 that are designed for car users, as they are on a road with no pavement, no street lights and no bus service.

If there were some more creativity and flexibility, and more consultation with communities, the affordable housing contributions could be used in a more effective way. The approach must be creative, and the voices of communities must be at the heart of what is done.

**Wendy Hand:** Some issues that I would have raised have already been covered. I will go through my bullet points.

Planning issues can be a nightmare. Our planning department is not fit for purpose. I might be speaking out of turn, but you are told different things by different people, so it is difficult to work with it.

I have already mentioned the issues with getting contractors in Shetland. The increasing cost of materials is a constant issue.

Somebody mentioned that there is an assumption that you must be on benefits to get help with insulation, windows and so on. That is not always the case, but people are not aware of that, so those who have lower incomes but are not on benefits do not always benefit from the help that is available.

However, even if you can get the funding for that work to be done, there is a limited number of contractors who can install the insulation, windows, heating and so on. It can be an absolute nightmare getting somebody to give you a quote in the first place. I mentioned that the local housing association has been building some houses. However, it has had to reduce the amount of houses that it will build, partly because of cost, but also because the contracts are too big for a lot of the local contractors.

The increase in tourism has affected private rental. For example, in certain seasons, an owner can get the same money for a week as they would normally get for a month through a private rental. I have heard of people who have six-month contracts and are kicked out for six months so the owner can get the seasonal money, and then the property becomes available for private rent over the winter months, which is totally out of order.

Young people are leaving and not coming back. That is a personal issue for me, as my daughter will not live in Shetland because she cannot afford to buy a house and cannot afford the local rents, which are ridiculous. She is a teacher, and we will

lose her; that is evident. Megan MacInnes mentioned that we have an ageing population, and the fact that the youngsters are not coming back will be an issue at some point.

For younger people in particular—speaking from the experience of my daughter and my son—there is an issue with buying houses. The system in Scotland of asking for offers over a certain amount when you are buying a property is ridiculous. Since Covid, we have had evidence in Shetland of people paying £100,000 over the asking price. Youngsters have got absolutely no chance in that situation. The extra money on top is not relative to the cost of the house, and young people cannot get a mortgage for that part. They have to save up for the deposit as well as the extra amount and then go into a lottery that they may or may not win, which is an absolute nightmare. I could not believe it when I moved up to Scotland. The system is an absolute nightmare.

Because of that situation, more older people from outwith Shetland who have that disposable income are buying the properties and moving to Shetland, which then increases our ageing population, so there is a detrimental effect from that point of view.

**Dr Yanes:** I will quickly pick up on a couple of things and add a little bit to what colleagues have said.

In our Highlands and Islands report, we have a quote that says:

“There isn’t a rural housing crisis. There’s a whole series of different crises.”

That is important for the committee to understand and acknowledge, because the situation is not the same across Scotland. Rural Scotland and urban Scotland are not the same, but areas of rural Scotland are not the same as other areas of rural Scotland. For example, the problem that Wendy Hand spoke about in Shetland, where there is a housing association with the money to build but there are not enough workers to build the houses, is very different from the issues in the Outer Hebrides, Caithness, the Borders and the Highlands. Therefore, the policy and legislative response cannot be the same. Across the country—in rural areas and urban areas, and within those areas—there must be divergent ways of addressing the issues.

A serious commitment on rural housing must involve a bolder approach that rethinks the way that we undertake construction and do our planning. When I speak to my colleagues in national human rights institutions in Norway, Sweden and Finland, one of the things that I am told is that we do not know how to build in rural areas. I do not know enough about architecture or planning to explain this fully, but there are

mechanisms that require houses in Barra to be built in the same way as houses are built in Edinburgh, even though the contexts are quite different. Issues around the cost of building houses and the way in which houses are made fit for purpose are thought about in a national context, but they should not be. That is one of the big tensions in this area. If we are seriously committed about building more, we must build differently, and we must rethink our planning and procurement legislation.

The final thing that we have not picked up, but it is important to discuss in the context of housing, is our serious problem of rooflessness—that is, extreme homelessness, which concerns situations in which people do not have temporary accommodation and local authorities deny the provision of temporary accommodation. In rural Scotland, the issue is made invisible by the fact that we do not see rough sleeping in the same way that we might see it in urban centres. That is often because people are sofa surfing—that is, someone has allowed them to sleep in their home, camper van or camping pod—so we think that there is no rough sleeping and that there are no people who do not have access to temporary accommodation, but that is not the case, and the numbers are quite significant. If we are serious about meeting our human rights obligations and our minimum core obligations, we must start there. If we are going to solve some of the issues in housing, we must start with the people in rural Scotland who have no accommodation whatsoever.

**The Convener:** We will now go to Paul McLennan.

10:45

**Paul McLennan:** Thank you, convener. I was going to ask some questions on housing, but I think that the witnesses have answered them. It is an issue that we need to discuss carefully.

Luis Yanes made an incredibly important point about having localised solutions. The rural housing action plan looked at the issue, but it is clear that there is no one size that fits all, even in different parts of rural Scotland.

I have a couple of questions. Two key things came through for me when we were in Blairgowrie last week. One was about the cost of living, so I will ask about the cost of living in general, and the second was about looking at solutions as to how we deliver services. Is the council best? Juliana talked about having a multi-agency approach, but who is best to deliver these services? Is it national Government setting the policy framework, is it local government doing what it does, or it best to leave things to local services taking a multi-agency

approach? For me, one of the key questions is how we best deliver services.

Capacity building was raised as an issue last week. You will hear that being discussed in all the TSIs. Do we have enough capacity in our communities to deliver the services that need to be there? Who is best to deliver those services, and is there enough flexibility within the system now?

In my experience as a councillor and from speaking to organisations, I have often found that those in the local community are the best people to deliver services, but do they have the capacity and the funding to do that? We need a change in the way in which we deliver services in rural Scotland in terms of building that capacity. What should we do on the back of having heard from you all today? One of the key things is how we support local communities, how we fund them and how we build capacity.

Juliana, I will come to you first, because you talked about the multi-agency approach, but there are two fundamental questions: who is best placed to deliver services, and how can we support that?

**Juliana Amaral:** I welcome this conversation. For us across the third sector, it is not one thing or another. This is about the patchwork that makes the fabric of what communities are about. Having a seat at the table today is important, and when it comes to funding and service delivery, the third sector needs to be at the table to have those conversations.

There needs to be a serious conversation about redesign. My colleague Alan Webb often mentions reimagining how services should be delivered, with communities at the heart of that decision making. Absolutely, some activities and services are best delivered at that local level, with communities supporting gaps where they exist. However, that needs to be resourced, and it needs that approach to decision making. Other services are public duties. We need to come together as a wider partnership to look at local solutions in a way that prevents services from diminishing or ceasing altogether because of funding pressures. We also need to look at the money that is already flowing. Money is flowing in the system, but we do not talk about making the best use of that money. We need to be serious about how we apply community-wealth building in communities and about how contracts with public authorities can support some of the community-led initiatives.

Capacity building is about looking at the third sector as a key player—it is about building its capacity to be that key player. I am talking at a high level, but that high-level conversation needs to happen. It is not about looking to the TSIs or other organisations for feedback when decisions

have already been made; it is about asking them the questions when those questions are being asked. It is exactly as you say: how can we do things differently, and who is best to lead—and on what?

For us in the third sector, it is often about tapping into where we can add value. We have mentioned community transport, for example. There is an absolutely clear need for community transport. It costs less to run, it potentially creates hyper-local employment in communities and it provides door-to-door transport that no big transport provider will provide. Such things will be part of the hyper-local solution, but community transport is not the only solution. There will still need to be investment in the delivery of public transport.

Until we look at the nuances across the landscape and where services can be delivered in partnership, we will not get the right answer, because things are very siloed at the moment.

I will pause there, because I am aware of the time and I know that my colleagues will bring more to this conversation.

**Paul McLennan:** You make a good point, and we will open it to the floor.

One of the key things is that Scotland and UK are the most centralised Governments in Europe. They are far too centralised. Even our local authorities are much bigger than municipal authorities in other parts of Europe. Are there lessons to be learnt about how we deliver services? How do we localise services in the best way possible? That is a key issue for us to look at.

**Alan Webb:** I could probably talk for an hour on this, but I know that you will cut me off after a couple of minutes. It is a good question to pose. For me, there are two fundamental areas to look at when we think about why we have got to where we are with centralisation.

First, for a long time, we have confused public service with the public sector. When we are looking at public services responding to what people need, we just put the money into the public sector and hope that—somehow—it will get to where it needs to be. In our on-going conversations with the Minister for Public Finance, we talk quite a lot about how much goes in at the top and what comes out at the bottom and gets out into communities.

The second area is the on-going financial situation in our public sector, which is trying to hold on to services that we have created but which might not be needed. That becomes quite extractive. The public sector takes away from communities to maintain the system that we have built but which, in fact, we need to let go of.

Juliana referred to the idea of reimagining. In Dumfries and Galloway, we have a new language around reimagining public service. It is not about reform. It is too late for reform, which we should have done 14 years ago, or even when we were coming out of the pandemic four or five years ago. We had a choice to renew and do something different, but instead we did recovery—we went back to where we were before, and it was not great before.

To respond to your question, I think that there are two significant ways that the Government can influence things. The first is through direct investment in communities, which we have called for. If the Government intends communities to be stronger, it should not default to investing the money in the public sector. It should look at where best that money can get directly into communities so that they can take ownership and action.

Secondly—this is a great opportunity for me to plug what we have been doing—in Dumfries and Galloway, we have built a model around community-based infrastructure, involving the community and voluntary sector in particular. We have taken learning from different models across the UK around community responsiveness and various kinds of public service reform for over a decade to create our model, which is called the DGCollective. Essentially, it is a structure through which we can get communities to start to collaborate to identify what they need, what is strong about what they have and therefore where the public sector can complement that strength, rather than limit what is available based on a service model.

We need to commit to infrastructure, and in my view we are starting to build that. It needs investment to create the capacity—to go back to your point—but we also seriously need to change the mindset. If we want communities to start to take the lead, to take ownership and to genuinely do place-based working, we need to stop the default funding of the systems that we already have and make the money flow in a different way.

There are lots of opportunities to do that. In Dumfries and Galloway, we have established our model; the bit that we are lacking is the investment. We just need to be brave enough to step off and try it out. It can only be better than what we currently have, which is this extractive community model that causes us real concern. I hope that that was concise enough.

**Megan MacInnes:** It is a key question, and I thank Paul McLennan for raising it.

I completely agree with what Alan has just said about the need for increased resources to be made available to local groups, whether they are development trusts, community landowners or

other third sector groups that work at the local level.

However, it is not just about the funding that local groups can receive. It is also about looking at what broader support they need and how to reduce some of the barriers that exist and are preventing those groups from being able to fully deliver public services at the local level. We also need to recognise that many of these groups are run by or are heavily dependent on volunteers, and you cannot expect volunteers to deliver public services. Public services need to be properly paid for and resourced at the local level.

That gets to the wider question about localisation. It is hard to have this conversation without reminding everyone, again, that the Highland region is the same size as Belgium. There is a clear problem here, in that, even within our decentralised system, we are strongly centralising, and it cannot be efficient to deliver public services at the local level across regions of that scale.

Another element is the question of budgeting. At the moment, budgets are allocated on a per-capita basis, which does not take account of populations in sparsely populated and rural areas. Is there another way in which budgets can be allocated that can take account of the factors of rurality and increasing costs for everybody who is involved in trying to deliver public services?

I go back to something that I said in an earlier answer. We need to look beyond local authorities and multi-agency working in a traditional sense and look at some of the other non-state actors that play a critical role in rural areas. For example, there are private sector companies that are significant owners of land, and Scotland has committed to making sure that we own and manage land in a way that delivers public good. What does that mean, therefore, when it comes to making sure that rural communities are able to access and benefit from the public good that is derived from that land?

A parallel discussion is taking place across much of Scotland on what community benefits are generated and derived for local communities from all the different large-scale investments that are coming in, particularly across rural areas of Scotland. We know from the discussions that are taking place that those community benefits are not simply financial benefits; there are a whole range of infrastructure, employment, housing and other benefits. We need to connect the dots across the different conversations to make sure that we are looking at the role that non-state actors, as well as local development trusts, community landowners and local authorities, can play.

**Wendy Hand:** Some of my points have already been made. Yes, the third sector could deliver more services, but scale is an issue. As we did with the NHS, we could potentially do smaller things, but we could not take on a whole service. That must be considered, because we do not have the capacity in terms of people.

Funding is the biggest issue: we need multiyear funding, rather than funding for the third sector being cut when finances get tight. Somebody has already mentioned that feeling that services are being kept within the public sector.

We also need to make sure that we have full cost recovery, because that can be an issue. In the third sector we cannot always offer the benefits and salaries that the public sector offers, which is another issue. You need to remember that the voluntary sector is not free—volunteers are not free—and we have limited capacity in different areas.

11:00

**Artemis Pana:** I will try not to repeat what everyone else has said, but Scottish Rural Action agrees whole-heartedly with Juliana Amaral's comment that the answer to your question is to have genuine partnership working between Government and communities. We also agree with the comments of Alan Webb, Megan MacInnes, Wendy Hand and others on the importance of local democracy and promoting community wealth building.

It is important that we are having this conversation, in this committee room, when we are focusing on human rights, because the language of human rights is a powerful one that can bind communities and Government in shared action. As Alan Webb said, it can be the vehicle for reimagining the future or, as Megan MacInnes said, it can be the vehicle for connecting the dots.

Last month, in partnership with the Scottish Government, Community Land Scotland and many other organisations, Scottish Rural Action delivered the sixth European rural parliament, which took place in Aberdeenshire. It saw 400 people come from 40 European countries to Scotland to learn from us. They brought with them a lot of discussion about the right to stay, which was recently embedded in the new Commission's—that is, the European Commission's rather than the SHRC's—rural policy agenda. It is linked to the rights of young people to live, work, and have an education and a future in the places where they grew up, and it enables succession planning based on the extent of the population. Those are its aims.

It is a bit of a catch-all right, but it is also put into practice. Last week, the Commission announced

that there would be a 10 per cent rural protection in the EU's budget linked specifically to the right to stay. In Scotland we might debate whether we would focus on the right to stay or on a broader right to mobility within the country, but those are all healthy conversations to be had in the context of human rights. As I said, the approach should be about creating a positive platform for meaningful dialogue between communities and Government, based on a shared vision.

**Kirsty Harding:** I promise to keep my remarks brief. My fellow witnesses have all covered the huge importance of collaborative working: we all need to work together. However, to do that, the third sector needs to have an equal seat at the table—Juliana Amaral said those exact words. The sector needs to be listened to so that we can allow things to happen upstream rather than, as is traditional, downstream, which is where things start to go wrong. Often that is where a problem kicks in.

When we look at giving communities power and allowing them to do things, we should remember that they have a vested interest. Communities want to make their surroundings better—they want to improve them. They are the experts on those areas, so we need to use them.

The Highlands is the best example. We love to use the size of Belgium as a comparison for the size of the Highlands—we talk about that a lot. However, it is important to remember that the region includes various areas, all of which have different traditions and even different climates that they need to consider. We need to support those people through education. Sadly, we will always need a bit of money to come in, too. If we can put education and support in, though, those communities will often flourish and stop needing assistance, and then they can go on by themselves. It is all about support coming in at the base level.

For me, the main point is about us having an equal seat at the table.

**Sheena Stewart:** I will respond briefly, because other folk have already said what I was going to say.

I totally agree with taking a multi-agency and multidisciplinary approach and with the idea of us being there at the table as an equal partner. Huge reliance is placed on the third sector to deliver services, so why should we not be there at the formation and planning levels, too? Often, the third sector has valuable insight into a community's needs at the grass roots—for example, from its experience in delivering care, transport or mental health support services—so its contribution is vital.

The approach should be not piecemeal but collaborative. A multi-agency and multidisciplinary

approach would benefit our population, so collaboration is required.

**Alasdair Ross:** My point has been made already, but there is no harm in absolutely hammering it home. The participation of communities must be meaningful, and it must be at the heart of everything that happens. However, what we see happening are piecemeal consultations and engagement exercises that just do not even touch the sides. I reiterate that community participation must be meaningful.

**The Convener:** We move to questions from Maggie Chapman.

**Maggie Chapman:** Good morning, everyone. Thank you for joining us and for your comments so far.

I will focus on employment and social security issues. We have already talked about some of the barriers to employment that you have raised, such as transport, so we need not go over those again. However, there are other key challenges for rural communities in accessing support into employment and employment itself. How can we navigate around those barriers—if, indeed, that is at all possible?

I am not sure who would like to pick that up first.

**Juliana Amaral:** I am sorry to keep coming in.

**Maggie Chapman:** No—that is fine.

**Juliana Amaral:** That is a very important topic. When we think about the three grand challenges that rural communities face—transport, economic disadvantage, and the overall impact of people's life chances—we can see that employment is regarded as a way out of poverty. I am thinking mainly about the Scottish Borders, where one in every four children is in poverty and about 16 per cent of the population relies on universal credit.

There are several challenges. A key one in the Scottish Borders, which includes many rural communities, is transport. Employers in the area are mainly small businesses and they are very spread out. There is also an element of inequality in the system. Childcare is a significant issue in such communities, given the cost and the lack of provision. When care is available, the cost is often a barrier. By default, those elements push women out of the labour market and career progression, which then drives families into further poverty. There is what we might call a feedback loop of poverty, lack of transport and lack of skills to do the job. Women also tend to be unpaid carers in such rural communities.

On top of that, there is depopulation. We are losing our young workforce to urban areas where employment is more attractive and opportunities

for learning and skills development are easier to access.

We feel that there is a need to look at the context that contributes to poverty, which includes isolation and lack of opportunities for sustainable employment. When we do not look at those wider issues, it makes it difficult to address the challenges.

As I mentioned earlier, the Scottish Borders is ahead of the curve in terms of having an ageing population. It has been predicted that from 2018—so that period has already started—all the way to 2028, there will have to be an increase in immigration to counterbalance the loss of population. However, as we have already mentioned, that will need better resourcing and employment opportunities for people and more housing.

At the moment, our approach to addressing challenges feels a bit piecemeal. There need to be local—in fact, what we might call hyper-local—initiatives for employment and skills development. I will use my own experience as an example of the value of locally based approaches and service accessibility. As someone from an ethnic minority background, my learning journey started in the local community centre, with a class in English for speakers of other languages. If we are talking about relying on immigration to counterbalance the loss of population, such provision needs to be in place at a hyper-local level. I have managed to progress into a profession and have achieved a master's degree, but my journey started at a very local level. When we remove the provision that will enable that, it makes it difficult for people in local communities to have entrepreneurial mindsets and the ambition that comes with understanding the value of services.

As it has already been mentioned, I will not say much more about the infrastructure that is needed for that. In rural communities I would like to see more investment in enterprise, in supporting women to go back to work, and in childcare and overall caring roles and responsibilities. There is absolutely a need for investment in enterprise models beyond the traditional pathways to college and further education, including apprenticeships for young people so that they can start earning. Rural communities need to earn so that they can survive. We have begun to address the challenge of cost of living in such areas. The lack of continuing employment and further opportunities also needs to be counterbalanced.

I must just mention that the Scottish Borders is one of the lowest-wage economies in Scotland. On average, a worker there earns £50 a week less compared with workers in urban areas. That has a weekly impact on people's wages.

All those challenges need to be considered. People need to move into employment, and there needs to be thinking beyond the traditional pathways for skills development and work opportunities.

**Maggie Chapman:** That links into what Paul McLennan was talking about: not only capacity building but broader cost of living issues. If the cost of living is higher, support services do not go as far.

**Alan Webb:** I agree with the points that my colleagues have made. There are two main factors here: the difficulty in accessing the work and jobs that are already available in rural communities and the need to create more opportunities.

The cost of living is a hugely important factor, too. In Dumfries and Galloway, we have a particularly low-wage economy. The cost of living is higher there, and it is increasing. Every four to five years, Citizens Advice Scotland does a practical exercise where people travel around shops to find out the actual costs of buying goods. There is a 125 per cent difference between the cheapest basket of shopping in a town versus the cost in a more rural store. If someone does not have transport, because of either cost or accessibility, they do not really have a choice about where to shop, either.

Many people in our communities are just looking to have enough to live comfortably—not necessarily for anything hugely aspirational such as being able to travel around the world. That comes back to the point about the creation of opportunities. In rural communities here is not enough focus on building local economies. We are very regionalised or national when we look at the economic picture, but we do not necessarily invest enough time in the sustainability and building of local economies, which can create jobs and use the skills that are already within those communities. That creates a significant gap.

The second area that I would highlight is people's ability to access work. As Juliana Amaral has mentioned, many barriers around transport, the cost of childcare and so on prevent people from being able to take on opportunities.

In Dumfries and Galloway we have a significant issue with digital connectivity. We know that it is not good enough. In 2021, Third Sector Dumfries and Galloway commissioned its own work to understand community-level needs on that front. We have a very succinct action plan that we are all signed up to, but we cannot deliver the plan's actions because national investment in digital development has been shrinking year on year since our report was produced.

Even if people had the digital skills and the motivation to use them, our connectivity is still not

great. Download speeds in Dumfries and Galloway are half of the Scottish and United Kingdom averages, so there is no reliable internet connection in the first place. In all the five indicators of good connectivity on which the UK Parliament keeps up-to-date information, every area in Dumfries and Galloway is in either the bottom 30 per cent or the 10 per cent worst-performing areas across the UK.

My point is that we need to focus on creating local opportunities for local economies. However, if we want people to be able to access opportunities more widely, we need to do something about our digital connectivity.

**Maggie Chapman:** Alan Webb, is there anything in the social security space that you would highlight in terms of access to support? You mentioned citizens advice support. Are there particular challenges that are distinct for your area?

**Alan Webb:** The availability and accessibility of independent advice is hugely important. We have good enough coverage but we need to reach people who do not understand that they should have access to advice and that they are eligible to access that. Therefore, we need to be even more proactive in our independent advice services. We know from Dumfries and Galloway Citizens Advice and other advice services that about £9 million—that is the most recent figure, which is for last year—was brought back into local economies and to households, through their advice. That is hugely important. That figure could be even higher, because that outcome relies on people asking for the help in the first place.

Unfortunately, we are currently facing the situation of a local proposal to dismantle the funding for those services, which is not at all helpful. There is never a real sense or understanding of what someone is entitled to, and there is a lack of consistency of support to get that across rural communities. We try hard to do that in Dumfries and Galloway, but there are undoubtedly gaps. If you do not have that support, your resources and help to look for work or develop skills are limited because you are only focused on living day to day.

**Maggie Chapman:** On tiny little bits, yes.

11:15

**Dr Yanes:** This is an important question, and I want to split the issue of employment into two parts. First, it is important to acknowledge that there are parts of rural Scotland where there are ample employment opportunities, but there is insufficient housing to enable people to take up those opportunities. If you open *The Orcadian* on any given day or any given week, you will find

dozens and dozens of employment opportunities, including some well-paid employment opportunities, either through the NHS or Orkney Islands Council. There is just nowhere for you to live if you take any of those opportunities. We hear anecdotes repeatedly that people take such jobs, move to Orkney for a couple of weeks, for example, and then have to resign because they cannot find anywhere to live. There are parts of Scotland where there are ample employment opportunities, but the infrastructure—that could be childcare, housing or something else—is not there to support those jobs.

There is a different picture in those parts of rural Scotland where there is not sufficient employment. That often can be, as Alan Webb was saying, as a result of a lack of digital connectivity. People might want to be able to work from those areas, but there is no ability to do that. There have been good proposals from community development trusts, for example, where people have said, “Why don’t we transform the village hub into a digital hub? We could invest money there, rather than into every single house, and people can work from the hub”. Unfortunately, things like that have not been sufficiently funded.

There is also, and we think about this less, centralisation of employment, not just services. There is employment that could work anywhere else in Scotland is suddenly only in Edinburgh or Glasgow, or employment that could be anywhere in Highland Council, but is in Inverness. There need to be strong commitments from both national Government and local authorities to put jobs back.

The commission has asked why there is not an island team based on an island, for example. If we have an island department of the Scottish Government, why is that not based on an island? Why do we not base part of the work of the Cabinet Secretary for Rural Affairs, Land Reform and Islands in rural Scotland? There are incentives that could be used to take employment that has been withdrawn and moved into central urban areas and bring it back into the communities.

**Maggie Chapman:** I suppose—Tess White will be familiar with this as well—where there are job opportunities, there may be housing, but there might be no local school for a family who has moved in. We need to look at this in the round.

**Kirsty Harding:** We have talked about so many employment barriers in our discussions today. On your example of housing, we hear all the time that an area needs a new teacher at a school, but there is nowhere for them to live or they are in an Airbnb and there are adverts up asking is there anywhere to put them. That means that you cannot get trained people. Even at a basic level, if you are a teenager and you live on the outskirts of

Inverness and you want to take on a weekend job, say working in one of the shops, you cannot get a bus into Inverness to come to work on a Sunday.

One of the big problems that we have is filling roles. That is a huge issue in hospitality. People used to come over from abroad to work and they cannot come anymore, and we miss them massively. Social care is paid dismally for the role that people do. If you have any experience of social care, you will know that the people who work in social care are absolute angels who go above and beyond. They do not get paid well. If you are a working mum, say, and you want to have a career in social care, you will not earn enough to pay the childcare costs to do that—and that is if you live somewhere that has childcare—and you can be at the beck and call of a local childminder who is not always available.

We have a couple of charities that do some great work with childcare in the Highlands. One is called CALA—Care and Learning Alliance—and one of their big bugbears is that often, if communities come together and they say that they will create something, say in the village hall, they do not have the right infrastructure. Perhaps there is not the right nappy-changing facilities in a separate area. There are rules and hoops that they cannot jump through to allow them to create that project. Sometimes we need to have that bit of flexibility to allow people to manage things.

Within the social care world, we need to look at how to manage the barriers to get people working as well as looking at the base levels that such roles pay. It is really expensive to live in some rural areas. We have talked about houses that are not insulated. We have talked about the cost of heating. We pay more in fuel bills up in the Highlands than people do in other parts of Scotland or than people do down in London. It is criminal.

On a more positive side, the Highlands as an area has a lot of work coming its way, especially within the world of engineering. We have the green free port and we are building all the huge pylons—that is upsetting a lot of people, but they are coming—which is going to bring in lots of work. I know that the local colleges and universities are already looking at how to train people. The worry is the aftermath. If we are going to have lots of people brought in who do all this great work, what are they going to do afterwards when everything has been set up? That is one of the other concerns.

**Sheena Stewart:** A lack of childcare is a massive barrier to accessing employment opportunities. As we heard, it is not just housing that is a problem; childcare is a massive issue and it has a direct impact on the economy, employability and on human rights. Childcare

policies and frameworks need to have a rural and island lens to allow services to run in extremely rural settings. It cannot be one framework fits all. There needs to be a budget for rural childcare facilities because often it is impossible to have a steady flow of children through the door. For example, in Uist there is no independent childminder anymore, due to that work not being financially sustainable. There is no subsidy support when the numbers are low.

An example of good practice was the creation in 2024 of a multi-agency Uist and Barra childcare forum, which worked alongside other partners to proactively address the challenges in respect of childcare in the islands. It worked closely in partnership with local and national agencies as well as local and national Government.

Obviously, communities know best what the needs are, but real investment is required at the Government level to come up with solutions. We need to work together; the Government must continue to work with local providers and experts to work and to invest at a national level. It is about the working relationships and investing money. As I said, it is not a one-size-fits-all. There is a plea there, please, to work together with our local communities to come up with sustainable solutions.

**Alasdair Ross:** I will pick up on your point about social security, Maggie Chapman. Why, in the 21st century, do we have a system that is so complicated that people do not understand what they are entitled to? At a time when people really, really need support why are they faced with a system that is bamboozling? Employers, too, do not understand the social security system. They do not understand that people might not want to take on more hours because that would mean that they lose out on part of their entitlements. Employers do not get how difficult it is to start a job at 6 o'clock in the morning or work until 10 o'clock at night in a rural area, because you cannot get to work or get home, or you have no one to look after your kids.

The system does not need to be this complicated. The amount of resources that we are putting in to helping to people navigate the system is becoming unsustainable.

**The Convener:** Any more indications on this point? If not, we will move on to our final question from Pam Gosal, please.

**Pam Gosal:** The protection of women and girls, especially those fleeing from domestic abuse, has been one of my top priorities since I entered Parliament. Earlier this year, the committee took evidence on access to civil legal aid and the barriers that many survivors of domestic abuse face in accessing such aid, especially in rural

areas. Witnesses spoke of “legal aid deserts”, meaning geographic areas where it is difficult to find a legal aid solicitor. We heard the shocking example of a Highland woman who had contacted 116 legal aid lawyers regarding her divorce case. In some cases, in small communities where everyone knows one another, survivors fear seeking legal advice, as solicitors are sometimes acquainted with the perpetrators. How can changes be addressed by community organisations and the Scottish Government?

**Dr Yanes:** First, I will draw on the work that we have done on access to justice and the map that we have produced of where the advice centres are in Scotland. That includes centres that offer advice to victims of domestic violence, advice on social security—following on from Maggie Chapman’s questions—and advice on other areas. That map is a very clear, graphic representation of where the advice centres are and where they are concentrated—where most of the population are, which is in the central belt—and where there are areas where there are few to no advice centres.

The starting point, before going to legal aid, is looking for where you get advice and what type of advice you can get. For the whole of Sutherland, for example, the advice centre is in Kinlochbervie. That might be a two or three-hour drive for someone just to receive advice. That is the starting point.

Then there are other layers that in general make seeking advice and complaining about sexual violence, domestic abuse, and any other human rights issue difficult for some communities, because of stigma, who the perpetrator is or how the information might be used or abused. We have heard concerns in different rural communities about the way in which the local press, for example, might use the information. There are other policies that are in place for good reasons on how evidence is gathered, for example, that might make it difficult. If you are a victim of sexual abuse, you might have to take a ferry in the clothes that you have been abused in, and travel in the condition that you are in, to Glasgow or Edinburgh, because the system is not placed to be able to take and gather that evidence in the rural area. We have a system of layers before the point of getting to legal aid, which is another general crisis that we are seeing.

It is important to see the different components of the system in which victims of sexual abuse might find themselves and how that might mean we see little reporting in general, across the country, but particularly in rural areas, where there will be a higher barrier which means that many people do not feel comfortable enough to speak out.

**Pam Gosal:** On that, Dr Yanes, I want to probe a little bit more. What should communities or the Scottish Government be doing about this?

**Dr Yanes:** There is a good amount of work from various rape crisis groups across Scotland that indicate some of the policy solutions. It might differ in each area, because in some islands and rural communities, there might be better access to advice than there is in others. The solution will depend on that. There would have to be a careful reflection of what the problem is in each community and what a potential solution is in each community.

It would probably be inappropriate for me to speak to the wide range of what the solutions would be, but some communities, women’s groups and rape crisis groups have said to me that they feel that their concerns are missing, that their potential solutions have not really been heard and that their policy recommendations have not been implemented. There is a need for a deeper dive into what potentially could be implemented, in relation to Police Scotland and all the way through to wider reform of legal aid and our criminal justice system.

11:30

**Alan Webb:** I agree with Luis Yanes’s position on advice services; I am less close to the legal aid position. In Dumfries and Galloway, most support services are provided by community and voluntary organisations. All our data and insights into experience about women and girls comes from community and voluntary organisations. It is probably fair to say that the people who best understand how to respond to that need, the advice needs and on-going support, come from those organisations themselves.

That takes us back to the foundations: those organisations are operating an essential service, not just responding to the needs of women and girls in a considerate and compassionate way, but undertaking proactive work in schools and with young people on understanding violence against women and girls and trying to tackle it up front. That has nowhere near the investment that is needed. It seems that the sustainability of our services—it happens across rural areas, but particularly in Dumfries and Galloway—is always under threat, but what women and girls need is that trusted place, the long-term relationships, and a place to go back to when they need it—it is not a moment in time, necessarily. We do not give the level of security and certainty to those services to enable them to be available all the time. Therefore, they spend a lot of their time finding the resources to maintain themselves.

All the information that is used across our public services about the access to services and the reporting of services comes directly from the third sector. On a fundamental level, we do not pay for that. It is a significant societal investment. It is not just operating a service. Violence against women and girls is a huge issue for our society, and we need to see it as such and therefore give it that level of investment.

I am less close to legal aid, but as Luis Yanes said, the foundation of being able to access advice and support services in a dignified and a human way when you need it is hugely important. I do not think that we have that right yet, never mind what we do when people get into a complex legal position.

**Pam Gosal:** Over the past three years, I have spoken to many domestic abuse organisations, be it Women's Aid or other organisations, especially in the rural areas. Over the summer I spoke to many people. They touched on what you have just said about the need for the services to have the right funding. They feel that they might get a certain amount of money this year, and that could be it, but there are people working for them and there are women and girls out there who need that help. They feel that there is no long-term planning; they need that multiyear funding. Could that help? Would having that security and sustainability, knowing that they have three years' funding, be something that would help?

**Alan Webb:** Absolutely. Even three years is not enough. As I said, our position is that it is not just like any other service. It is a societal issue that is not going to go away tomorrow. It is not acceptable to have annualised funding for services and a patchwork of funding—some for outreach, a little bit for doing housing support and a little bit for doing service provision. These are quite specialist situations and specialist roles, which, as I said, rely on building trust and relationships. They are not something that you can switch on and off overnight. When services like those that respond to the needs of women and girls and others come to the last months of their financial year, they have to hope that they will be able to keep supporting the women and girls that they are working with; it is not acceptable. You could put a lot into that category, but I feel passionate about this. As I said, it is a societal issue. We should already be committing to a decade-long investment in these necessary services to support women and girls, and in the proactive work that is needed for young people, too.

**Artemis Pana:** I completely agree with everything that Alan Webb has just talked about. Women's Aid services, which are at the front line of supporting women and children affected by gender-based violence, alongside Rape Crisis

services, are so incredibly stretched at the moment, and they have been for decades. Each Women's Aid service within a rural area might cover a smaller population than in an urban centre, but their geographical coverage is vast. What this means in practice is that you have very proactive organisations, exactly as Alan Webb says, that meticulously collect the data that Scotland needs to begin seriously addressing this issue. However, they are so deep inside that service provision priority that it is difficult for them to come together and collect the data that they have and that expertise, and feed it into policy. When they do, they are doing it from a very rural perspective that frequently gets lost in the national picture.

One of the things that the committee can do is to host a meeting specifically for rural Women's Aid, rural Rape Crisis and rural gender-based violence organisations, listen to them, give them that time and platform their views.

**Juliana Amaral:** To make a quick observation, this discussion goes back to Paul McLennan's question about who is best to deliver services. This is a clear example that the best to deliver services are local, embedded third-sector organisations such as Women's Aid and Rape Crisis, which are embedded in communities. The cost of delivering these services is high—absolutely. In comparison to savings in public service, it is nothing. We need to recognise that. More than anything else, if we do not invest in them, we will eventually see crisis interventions in health and social care. Not investing in the services is a false economy. That needs to be noted.

**The Convener:** That brings us to a close this morning. Thank you all for taking part in this discussion. We have gained a lot from it, and we will take what we have learnt this week and last week and put that to the Minister for Equalities at next week's meeting.

That concludes our formal business in public.

11:36

*Meeting continued in private until 12:40.*



This is the final edition of the *Official Report* of this meeting. It is part of the Scottish Parliament *Official Report* archive and has been sent for legal deposit.

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