# Draft Minutes of the Meeting of the Cross Party Group on Health Inequalities

## Tuesday 30th April 2019

## Theme of meeting: Poverty and Health Inequalities

## Chaired by Richard Lyle MSP

**MSP members present**

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| Emma | Harper | MSP |
| Brian | Whittle | MSP |
| Richard | Lyle | MSP (Co-Convenor) |

**Other members and guests present**

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| Linda | Alexander | Children's Health in Scotland |
| Bridie | Ashrowan | The Broomhouse Centre & Enterprises |
| Ijeoma | Azodo | University of Edinburgh |
| Lauren | Blair | Voluntary Health Scotland |
| Kate | Burton | NHS Lothian |
| Elaine | Carnegie | Napier University |
| Elaine | Cooper | SURF - Scotland's Regeneration Forum |
| Douglas | Hamilton | Poverty and Inequality Commission |
| Wendy | Hearty | Scottish Basic Income Feasibility Study |
| Deirdre | Henderson | Inclusion Scotland |
| Frederick | Hessler | Student |
| Zareen | Iqbal | ASH Scotland |
| Pierre | Jobert | Scottish Parliament |
| Nicola | Kaya | British Dental Association Scotland |
| Neil | Cowan | Poverty Alliance |
| Nancy | Loucks | Families Outside |
| Mark | Macleod | Energy Savings Trust |
| Andrew | Magowan | Inspiring Scotland |
| Allyson | McCollam | Voluntary Health Scotland |
| Peter | McColl | Snook |
| Michael | McMahon | Age Scotland |
| Su | Millar | LifeCare Edinburgh |
| Lucy | Mulvagh | The ALLIANCE |
| Maureen | ONeill | Faith in Older People |
| Lindsay | Paterson | Royal College of Physicians of Edinburgh |
| Rupert | Pigot | Diabetes UK |
| Heather | Pugh | individual |
| Patricia | Rodger | Advocard |
| Greig | Sandilands | North Glasgow Community Food Initiative (NGCFI) |
| Bill | Scott | Inclusion Scotland |
| Jonathan | Sher | Queen's Nursing Institute Scotland |
| Louise | Slorance | The Royal College of Paediatrics and Child Health |

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| | | (RCPCH) |
| Greg | Smith | Snook |
| Kaveri | Quereshi | the Global Health Policy Unit, University of Edinburgh |
| Claire | Stevens | Voluntary Health Scotland |
| Elma | Murray | Scottish Obesity Alliance |
| John | Watson | ASH Scotland |
| David | White | Edinburgh Health & Social Care Partnership |
| Mark | Robinson | NHS Health Scotland |
| Sam | Whitmore | NHS Health Scotland |
| Daniel | Kelly | NHS Health Scotland |
| Morag | McFadyen | Soroptomist |
| Izzy | Gaughan | Shelter Scotland |
| Keith | Robson | MS Society |
| Colwyn | Jones | University of Edinburgh |

## 1. Welcome, introductions and apologies

Richard Lyle welcomed everyone present. He expressed his sadness that Scott Granger, an individual member of the CPG, had died in March. The CPG had been represented at Scott's funeral by VHS and Rowan Alba and tributes concerning Scott's CPG membership, including Richard's, had been read.

## 2. Minutes of the previous meeting, 31st January 2019

Proposed and seconded. Duly accepted as a correct record.

## 3. Matters arising

There were none.

## 4. Health Equity Status Report Initiative, World Health Organisation

Noted that a case study on the CPG will be included in WHO's forthcoming report, to be published in June 2019. VHS (as Secretariat) plan to invite WHO to speak at the CPG's planned Garden Lobby reception on 5th November.

## 5. Proposed new members

The following applications for membership were accepted by a show of hands:

- Children's Hospice Association
- Cancer Support Scotland
- The Health and Social Care Alliance Scotland (The ALLIANCE)
- Senscot
- Age Scotland
- Global Health Policy Unit, University of Edinburgh (replacing Katherine Smith, currently an individual member)
- AdvoCard

## 6. Theme of meeting: poverty and health inequalities

Richard introduced the first of two speakers, Douglas Hamilton, Chair of the Poverty and Equalities Commission. Noted that Bill Scott (also present) will assume the Chair once the Commission becomes a statutory body in July. Most existing Commissioners are standing down, and new ones will be recruited (not 'appointed').

Douglas gave an overview of the Commission's approach:

- Poverty and inequalities cannot be simply conflated – people's material deficits may be addressed but still face other socio-economic inequalities
- The Commission has had three roles: to advise Ministers - and to publish the advice; to scrutinise policy; and to advocate. The Commission set its own agenda regarding scrutiny and advocacy, e.g. taking a strong focus on the child poverty delivery plan.
- The Commission has taken time over issues and its strength has been its collective effort, a solution focused approach, the diversity of Commissioners (some with lived experience of poverty and inequalities), and the involvement of other people with lived experience.
- Honesty is needed about the scale of our ambition and the reality of what we are prepared to invest in. For example, universal baby boxes will NOT reduce child poverty.

The Commission's remit pertains to the impact of Scottish Government policy, not Westminster policy or new areas/gaps elsewhere. Douglas elaborated on their scrutiny work of three key Scottish Government policies:

- Progress in implementing inclusive growth
- Budgets – ie the extent to which they address poverty and inequalities
- Progress in the child poverty delivery plan

*What Has Happened Since Shifting The Curve?* - the Commission's new report that scrutinises progress towards meeting the recommendations of the Independent Poverty and Inequality Advisor. Some progress has been made, with most of the 15 recommendations showing 'amber' in terms of progress, with one 'red' one: council tax reform. Housing and the social economic duty are showing 'green'. The issue remains that there is a lack of data on the actual *impact* of progress made in any of these.

The Commission is also publishing reports this summer on:

- Housing wealth and inequalities
- Transport and poverty

Three key areas that the Commission wants to see action on are: social security; work and earnings, and housing. Regarding social security, we know what the solutions are but so far we have not been honest about our willingness to invest in what is needed. Child poverty could be ended if £2.6 billion were invested: we won't invest that, so how much *will* we invest and how much child poverty are we prepared to tolerate? That said, the Commission is pleased about the commitment to an income supplement in the child poverty implementation plan, though has concerns about the timescales. On work and earnings, there is a good level of commitment to intensive support for parents but the money involved is 25% of what the

Family Fund distributed 15 years ago. Addressing housing costs is very challenging, because of the nature of the housing market.

Following the presentation, discussion was opened up and Douglas addressed a number of questions. Bill Scott pointed out the multiple mental and physical health impacts of poverty and inequalities, and said his role as the incoming Chair of the Commission was to convince the Scottish Government to do more and better, because progress had to keep shifting upwards and not stagnate/fall back.

Kate Burton (Scottish Public Health Network) said we need to ask politicians what the cost to communities and families is if we don't invest £2.6 billion in eradicating child poverty. She highlighted the Triple I project (Informing Interventions to Reduce Health Inequalities) pointing out that Westminster has asked the Scottish Public Health Observatory to brief MPs on this. Kate would like MSPs to ask for a briefing too. Mark Robinson (NHS Health Scotland and Triple 1 Lead) asked what would be useful for the Commission and the CPG. Neil Cowan (Poverty Alliance) pointed out that the Child Poverty Act and Social Security Act don't in themselves put money into people's pockets and that more urgency and ambition is needed. Reducing transport costs would be a good start. Jonathan Sher (Queen's Nursing Institute Scotland) pointed out that poverty is both a cause and effect of poverty. Douglas agreed and said the Commission hasn't looked specifically at health and that consultations last year hadn't flagged health strongly. Other agencies are better equipped to look at poverty and health than the Commission.

Emma Harper MSP agreed that transport is a big issue, including for young people in her largely rural constituency (South West Scotland) who struggle to afford to get to work. She agreed that we need to make the right spending choices and pointed out that the UK has a £205 billion budget for Trident and a £55.7 billion budget for HS2. Douglas commented that the Commission's brief doesn't extend to Westminster and that the Scottish Government has no powers to change Trident or HS2 budgets.

Heather Pugh described her experience of standing as a local government candidate, with the support of Inclusion Scotland, and the extent to which people talked to her about lined issues concerning transport affordability and food banks – e.g. if it takes two buses to get to the nearest food bank.

Brian Whittle MSP said that the Health and Sport Committee established that the cost to the Scottish economy of preventable health conditions is £30 billion pa. In reply to Brian's question as to whether the Commission had looked at education, Douglas said it had, in 2018, and that addressing educational inequalities is important as a longer term measure, though it will not help with the more immediate child poverty targets. Regarding adult education, Douglas said the issue was that there aren't the jobs with decent levels of hours and pay for the people who need them and that education is not necessarily the issue. The Commission's work on inclusive growth will be relevant here.

Richard Lyle introduced the second speaker, Wendy Hearty, Project Manager for the Scottish Basic Income Feasibility Study, based in the Improvement Service. Wendy's slide presentation focused on the practical challenges of piloting a basic income scheme in Scotland and on her project's work to date in scoping possible models. She drew on learning from basic income pilots underway or in planning in Finland, Ontario and the Netherlands.

Her project is a collaboration led by four local authorities: Edinburgh, Glasgow, Fife and North Ayrshire, with a £250,000 investment from the Scottish Government.

The motivation for scoping a pilot scheme includes the need to address Scotland's terrible health inequalities, as well as growing economic insecurity and other inequalities. A basic income scheme is viewed as a radical (and controversial to some) solution worth exploring, potentially able to address social justice and reduce income inequalities. The big challenge is how to design a scheme that gives people money unconditionally. Stigma, respect and dignity are big considerations as well as the money that people would get in their pockets. The project is exploratory, ie is not advocating a basic income as yet as it may not be feasible in practice. It has two years to deliver its verdict. It is largely research based. Issues to consider include childcare costs and housing costs as these would be higher than a basic income. Also, how could a basic income work in a country with such a complex social security system and one which largely focuses on household income rather than individual income? The project is in frequent discussion with DWP and HMRC.

In discussion, following Wendy's presentation, Bridie Ashrowan (The Broomhouse Centre) said that addressing poverty is as much about the type of society that we want to live in as it is about what is affordable/what we are prepared to pay for. A child/young person is twenty times more likely to end up in care if they are living in poverty. Women in poverty are very isolated and there is a societal cost to that. Wendy agreed with this, and said that the impact of a basic income on a community, including a community of interest, was what the project wanted to explore. In response to Bill Scott, who asked about the practical difficulties of a scheme, she said there are three big ones:

- Individual versus household payment
- Conditionality
- How to get the money to people (ie who would administer the scheme)

Regarding the latter, options being explored are whether the Scottish social security system could be the administrator, or could local authorities themselves do it u nder their powers to enhance wellbeing? Keith Robson (MS Society) asked how receptive the DWP had been to such a radical solution, to which Wendy replied that they have been open to the discussion, but that their focus is very much on universal credit.

**7. Any other business.**

Claire Stevens (VHS) reminded members that Anas Sarwar MSP (Co-Convenor) is sponsoring this year's Garden Lobby reception to celebrate the work of the CPG, on the evening of Tuesday 5th November 2019.

**8. Date of next meeting**

Tuesday June 18th, 12.00 arrival for 12.30 pm start, ending 2.00 pm. Joint meeting with the CPG on Lung Health.