

# Manifesto for **HEALTH** Creation

**Prioritising Prevention,  
Health Equity, and  
Parity for the  
Third Sector**





# Foreword

As we bring together our policy aspirations for the next 5 years we're starting from a position of hope.

The third sector is a key enabler, a catalyst for change in our communities and a vital part of the health system that helps reach those people who often find it hardest to access support when they need it most. Our members work with people in their communities, empowering volunteers, and providing a range of opportunities for social connection, culture, creativity and physical activity.

However, we are operating in an incredibly challenging environment. Health inequalities are widening and issues persist across a range of key determinants of health. We are also grappling with these challenges against a backdrop of constrained resources.

At Voluntary Health Scotland we are focused on growing our movement for health creation, building long-term relationships with partners, and gathering cross-party consensus to deliver our ambition beyond the political cycle. We know it will be challenging, but together we can make a meaningful impact for people now and for generations to come.

**Tejesh Mistry**  
**Chief Executive**

# Current Context

## Health Inequalities are Widening

The most recent figures related to health inequalities in Scotland are stark. The time that people in Scotland can expect to live in good health has fallen to a near ten-year low, and the gap in [healthy life expectancy](#) varies widely depending on a range of social factors, including where an individual lives, their ethnicity, or their gender.

## Implementation Gap in Prevention

Recent national policy has centred a commitment to prevention, including increasing funding for prevention activity, in both the delivery of population health priorities and in the reform of public services.

However, there is a considerable gap between national policy and local implementation when it comes to prevention. [Audit Scotland](#) recently reported that governance in health, particularly at a local level, is overly complex. Given the additional fiscal pressures facing public services, this lack of clear accountability often results in vital third sector prevention work being de-prioritised or de-funded.

## Third Sector Challenges

Third sector organisations empower people to live well. They support people and their loved ones to navigate a range of health conditions. Many, including Voluntary Health Scotland, also influence decision-making and policy regarding health.

Despite this, third sector health organisations are facing a perfect storm of rising demand, increasing costs and stagnating income. Our members regularly report that they are not always treated as an equal partner in decision-making about health policy or resource, and often do not receive sustainable funding.

# Our Manifesto Asks

## 1. Create a Prevention-Centred Health System



*A renewed focus on prevention, early intervention, and cross-sector collaboration is essential.*

Committing to a prevention-first approach, and building the system to successfully implement this, will support interventions that create health and relieve pressure on acute services.

Our asks are:

- Establish shared definitions of primary, secondary and tertiary prevention, and simplify lines of accountability regarding decision-making and reporting on preventative spend.
- Embed decision-making processes at all levels which meaningfully and sensitively engage the voices of lived experience, and recognise the vital role of the third sector in designing and delivering preventative health services.
- Commit to long-term and sustainable funding of social prescribing, including the Community Link Worker network, in line with existing commitments in the [Population Health Framework](#).



## 2. Prioritise Health Equity and the Right to Health

A rights-based approach would support prioritisation of the root causes of health inequality, specifically poverty, and person-centred approaches to health.

Our asks are:

- Centre health equity as a core cross-cutting government priority in the Programme for Government.
- Seek cross-party consensus on the long-term solutions required to address health inequalities beyond the political cycle to ensure policy continuity.
- Introduce a rights-based approach to decision-making where people with lived or living experience of health inequalities are meaningfully and sensitively included, or their voices faithfully represented.
- Proactively and consciously adopt a narrative that does not reinforce harmful stereotypes when developing health policy.
- Ensure that all people living with long-term or life-limiting conditions have access to the tailored treatment, advice, support, and rehabilitation they need, including access to palliative care at the end of life.
- Address unpaid carer health inequalities and protect their right to health by improving their access to health checks, mental health support, breaks and respite.



*Key to change is adopting a social model of health, acknowledging the complex interaction of physical and mental health and the role of social and economic determinants and health inequalities.*



### 3. Establish Third Sector Parity



*We need different perspectives making decisions at national and local level. This means a much stronger, formalised and paid role in decision-making for lived experience and the third sector.*

Policy solutions which protect the third sector and its workforce, including volunteers, as vital and equal contributors in the delivery of public services will help to safeguard the future of the sector.

Our asks are:

- Establish a formal, long-term partnership between the Scottish Government, the NHS, Local Authorities and the third sector which acknowledges the third sector as an equal partner.
- Commit to embed [SCVO's Fair Funding principles](#) for third sector organisations, including VHS.
- Review third sector funding and Fair Work requirements to ensure equitable pay for the third sector workforce.
- Invest in solutions to increase volunteer participation through the [Volunteering Action Plan](#).

## 4. Improve Health Measures and Datasets



*If we are constantly calling for the same types of evidence, then new ideas and innovation do not have a chance.*

A meaningful shift to prevention and health equity can only be achieved if national outcomes and indicators for health reflect this. It is therefore essential to ensure that health data is robust, accessible and focused on enabling health creation.

Our asks are:

- Consult with relevant stakeholders, including the third sector, to identify appropriate, sustainable and measurable national outcomes and indicators for health which reflect the shift to prevention and health equity.
- Review and improve the quality, intersectionality, and transparency of national health datasets, ensuring that third sector partners have timely access to relevant data.
- Identify and implement person-centred solutions for recording and managing patient data which empower people to share, or consent to share, their health information with a range of health practitioners.



## About Us

We are a movement for health creation. We work with our members and partners to address health inequalities and to create better health and wellbeing for people and communities. We believe health is more than the absence of illness. We are here to create health in Scotland by reducing inequalities and enabling people to live well. We provide the national voice for third sector health organisations in Scotland.



## Acknowledgements

This manifesto would not have been possible without the generous input of our members and wider stakeholders. We would like to thank those who engaged with us during our manifesto development process.

## Further Information

For more information about these manifesto asks, please contact our Policy and Public Affairs Lead, Sarah Latto, by emailing [sarah.latto@vhscotland.org.uk](mailto:sarah.latto@vhscotland.org.uk).



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