

Cross-Party Group Registration Form

Name of Cross-Party Group
Cross Party Group on Health Inequalities
Purpose of The Group and Proposed Discussion Topics <ol style="list-style-type: none">1. Please state the purpose of the Group.2. Please also provide a brief explanation of the purpose of the Group and why the purpose is in the public interest.3. Please also provide details of any overlaps with the purpose of existing Cross-Party Groups and an explanation of why, regardless of any such overlap, the Group should be established.4. Please also provide an indication of the topics which the Group anticipates discussing in the forthcoming 12 months.
<ol style="list-style-type: none">1. “The group aims to raise awareness of the causes of health inequalities amongst parliamentarians to influence legislation and amongst policy makers to promote evidence based actions which reduce health inequalities and to avoid legislation and policies which will make health inequalities in Scotland worse.”2. Public interest: The gaps between those with the best and worst health in Scotland are persistent, some are widening, and too many Scots still die prematurely. Deprivation is the key determinant, although age, gender and ethnicity are also factors. Health inequalities are avoidable because they are rooted in political and social decisions and they are costly to society and to the NHS and other public services. The CPG will bring together politicians, public and professional bodies, third sector and academia to raise awareness, educate, inform policy making, and foster collaboration. There is significant public interest in health inequalities, and even more so since the onset of the Covid-19 pandemic. The Secretariat’s survey of existing CPG members in March 2021, ahead of the Scottish Parliament elections, resulted in a

strong response and overwhelming endorsement for the CPG being re-established. Additionally, reports by organisations such as [The Institute of Health Equity](#) say that [the recovery from the pandemic](#) could provide an opportunity to rebuild Scottish society and the economy in a way that prioritises addressing inequality and poverty, whilst tackling the challenges of the climate crisis. The COVID-19 pandemic has shone a light on existing health inequalities across society. If health inequalities are not focused on in the recovery, public health professionals, academics and voluntary organisations expect that gaps in health outcomes and access to services will continue to increase.

The level of public interest is for the reasons set out below.

[Health inequalities](#) are defined as the “avoidable and unjust differences in people’s health across the population”. The term is in wide use by governments and public health across the world. Health inequalities are unjust and should be avoidable, because their root causes are largely structural and economic, rather than down to individual behaviour.

[Health inequalities in Scotland](#) affect a wide range of different groups, including:

- disabled people, including learning disabilities
- some ethnic minority communities
- people who live in deprived areas
- unemployed and homeless people
- vulnerable groups such as refugees and gypsy travellers

Health inequalities mean there are differences in health between these groups and the rest of the population, such as:

- reduced life expectancy
- greater incidence of non-communicable diseases such as cancer
- greater mortality from heart disease
- worse reported mental health and wellbeing.

[Reducing these inequalities](#) in health has been prioritised by the Scottish Government and the NHS for a long time but, in recent

years, improvements in average life expectancy have stalled, and the gap in life expectancy between the most and least deprived areas has increased. [Harms from the Covid-19 pandemic](#) have not been spread evenly across society. People from the most deprived areas were much more likely to be admitted to hospital with serious illness from COVID-19, the death rate from the virus in the most deprived areas was double that of the rate in the least deprived areas, and people of South Asian background were around twice as likely to die from COVID-19 compared to white people.

Restrictions to daily life introduced in March 2020 to control the spread of COVID-19 have had a myriad of adverse effects on people's health and well-being, such as:

- some routine healthcare treatments delayed or cancelled
- screening for cancer and other diseases paused
- GP appointments moved online
- non-urgent dental and optometry appointments cancelled
- isolation and loneliness increased
- education disrupted
- food insecurity increased.

All of these harms have had a disproportionate impact on a range of groups, including:

- those who were already suffering from poor physical and mental health
- people from ethnic minorities
- women
- younger people and children
- low-paid workers.

The [vaccination programme](#) has progressed very quickly but vaccine uptake has been lower in some groups of people and areas of Scotland. This includes people from some ethnic minority groups. This risks introducing more inequality in vulnerability to COVID-19.

3. **Overlaps:** There is no other group focused on inequalities or the inequalities of health. The CPG on Health Inequalities will concern itself with strategic and cross-cutting policy issues and evidence, because the underlying determinants of health inequalities are economic, social and environmental. The Group will seek to hold joint meetings with other CPGs during the

Parliamentary session, e.g. with the CPGs on Mental Health, Diabetes, and Improving Scotland's Health.

Topics to be discussed: The group aims to have four scheduled meetings per annum, with speakers and expert evidence at each meeting. At the registration meeting it was proposed that meetings focus on identifying and exploring new/radical thinking/evidence about what prevents, mitigates and reduces health inequalities, and that the group's meetings will be action oriented, seeking to generate outcomes such as parliamentary questions, member debates and motions.

MSP Members of the Group

Please provide names and party designation of all MSP members of the Group.

Emma Harper MSP, SNP
Brian Whittle MPS, Scottish Conservative
Paul O'Kane MSP, Scottish Labour
Donald Cameron MSP, Scottish Conservative
Carol Mochan MSP, Scottish Labour
Bob Doris MSP, SNP

Non-MSP Members of the Group

For organisational members please provide only the name of the organisation, it is not necessary to provide the name(s) of individuals who may represent the organisation at meetings of the Group.

Individuals

Organisations

Voluntary Health Scotland – Secretary
Age Scotland
Alcohol Focus Scotland
ASH Scotland
Audit Scotland

	<p>AvoCard</p> <p>Befriending Networks</p> <p>Big Lottery Fund</p> <p>Breast Cancer Now</p> <p>British Dental Association Scotland</p> <p>British Dietetic Association (BDA)</p> <p>British Medical Association</p> <p>British Liver Trust</p> <p>British Lung Foundation</p> <p>British Red Cross</p> <p>Cancer Research UK</p> <p>Cancer Support Scotland</p> <p>Care Inspectorate</p> <p>Centre for Health Policy, University of Strathclyde</p> <p>Changeworks</p> <p>Changing Faces</p> <p>Chest Heart and Stroke Scotland</p> <p>Children's Hospices Across Scotland: CHAS</p> <p>Church of Scotland</p> <p>Community Leisure UK</p> <p>Community Pharmacy Scotland</p> <p>Criminal Justice Voluntary Sector Forum (CJVSF)</p> <p>Culture Counts</p> <p>Cycling Scotland</p> <p>Deaf Links Tayside</p> <p>Energy Action Scotland</p> <p>Energy Savings Trust</p> <p>Eden Project Communities</p>
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	<p>Edinburgh Children's Hospital Charity</p> <p>Edinburgh Health & Social Care Partnership</p> <p>Edinburgh Voluntary Organisations Council (EVOC)</p> <p>Family Fund Scotland</p> <p>Genetic Alliance</p> <p>Health and Social Care Alliance Scotland (The ALLIANCE)</p> <p>HIV Scotland</p> <p>Improvement Service</p> <p>Inspiring Scotland</p> <p>Ingeus</p> <p>LGBT Health and Wellbeing</p> <p>Macmillan Cancer Support</p> <p>Margaret Blackwood Housing Association</p> <p>Salvesen Mindroom Centre</p> <p>MRC/CSO Social and Public Health Sciences Unit, University of Glasgow</p> <p>Nourish Scotland</p> <p>NSPCC</p> <p>Pasda</p> <p>Paths for All</p> <p>Positive Steps</p> <p>Public Health Scotland</p> <p>Queen's Nursing Institute Scotland</p> <p>Royal Society for the Prevention of Accidents (RoSPA)</p> <p>Rowan Alba</p> <p>Royal College of General Practitioners Scotland</p> <p>Royal College of Midwives</p>
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	Royal College of Nursing Royal College of Physicians of Edinburgh Royal College of Physicians and Surgeons of Glasgow Royal National Institute for Blind People (RNIB) Scotland Royal Pharmaceutical Society Samaritans Scotland Versus Arthritis Scottish Families Affected by Alcohol & Drugs Scottish Health Action on Alcohol Problems (SHAAP) Scottish Independent Advocacy Alliance Scottish Men's Sheds Association Scottish Obesity Alliance Scottish Rural Health Partnership Seescape Senscot Saheliya Shelter Scotland St Andrew's First Aid Streetworks Stroke Association Terrence Higgins Trust The Global Health Policy Unit, University of Edinburgh The Health Agency The Open University The People's Health Movement Scotland Viewpoint
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	VOX Scotland Voices of Experience Waverley Care
<p>Group Office Bearers</p> <p>Please provide names for all office bearers. The minimum requirement is that two of the office bearers are MSPs and one of these is Convener – beyond this it is a matter for the Group to decide upon the office bearers it wishes to have. It is permissible to have more than one individual elected to each office, for example, co-conveners or multiple deputy conveners.</p>	
Convener	CO-Conveners: Emma Harper MSP, Brian Whittle MSP and Paul O’Kane MSP
Deputy Convener	N/A
Secretary	Voluntary Health Scotland
Treasurer	N/A
<p>Financial Benefits or Other Benefits</p> <p>Please provide details of any financial or material benefit(s) the Group anticipates receiving from a single source in a calendar year which has a value, either singly or cumulatively, of more than £500. This includes donations, gifts, hospitality or visits and material assistance such as secretariat support.</p>	
NONE	
<p>Subscription Charged by the Group</p> <p>Please provide details of the amount to be charged and the purpose for which the subscription is intended to be used.</p>	
NONE	
<p>Convener Contact Details</p>	
Name	Emma Harper MSP

Parliamentary address	M4.06, The Scottish Parliament, Edinburgh, EH99 1SP
Telephone number	Office tel: 0131 348 6965 Mobile tel: 07967 780943

Statement on Compliance with The Code Of Conduct

I declare that the Cross-Party Group on <SUBJECT> is constituted and will comply with the terms of Section 6 of the Code of Conduct for Members of the Scottish Parliament.

Signed	
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Date	
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