

Public Health Scotland A consultation on the new National Public Health Body 'Public Health Scotland

Cycling Scotland submission July 2018

Question 1 - Do you have any general comments on the overview of the new arrangements for public health?

We welcome the new arrangements for public health in Scotland and note reference to the six public health priorities as the underlying principles for this. In particular, we highlight the sixth priority - "*A Scotland where we eat well, have a healthy weight and are physically active*" - and stress the need for action to be taken on this. Physical activity is an important aspect of health, yet many people do not get enough daily physical activity to meet recommended guidelines, often citing lack of time as a reason for this, and this negatively impacts on health. Cycling and active travel have an important role to play in this regard, as they can be easily incorporated into daily life and lead to significantly improved outcomes for both physical and mental health. Paragraph 17 of the consultation document states "... making it easier for people to continue to live active lives and to maintain physical and mental wellbeing for as long as possible". Cycling and active travel should be emphasised as an essential element of this priority in this regard.

It is also important to develop and understand linkages between policy areas, such as health and transport, and to understand the impact this has on achieving outcomes. We note the consultation paper states that the National Performance Framework will be used to measure progress against the public health priorities. This is welcome; however, specifically with regard to the sixth priority, there should be explicit reference to and linkage with other strategies and action plans including the Cycling Action Plan for Scotland¹, National Walking Strategy², Long-term Vision for Active Travel³, and Active Scotland Outcomes Framework⁴ to ensure that all physical activity outcomes are properly accounted for in public health decision making. Public Health Scotland should play a key role in helping to deliver these agendas. Delivering improved outcomes is outlined in the consultation document as the main focus of Public Health Scotland. This is welcome but it is important that it is done in a way which reduces both inequality and inequity in health and wellbeing outcomes. Addressing inequality and inequity in health outcomes, and in opportunities to access health (care), should be a central focus of Public Health Scotland. Linking to other Frameworks, Strategies and Action Plans will help to achieve this, ensuring a

¹ <https://www.transport.gov.scot/media/10311/transport-scotland-policy-cycling-action-plan-for-scotland-january-2017.pdf>

² <https://www.be-activeltd.co.uk/assets/Scotland-Walking.pdf>

³ <https://www.transport.gov.scot/media/33649/long-term-vision-for-active-travel-in-scotland-2030.pdf>

⁴ <https://www2.gov.scot/About/Performance/scotPerforms/partnerstories/Outcomes-Framework>

holistic approach to improving health is taken, as well as prevent unnecessary duplication between sectors/settings.

Physical inactivity is estimated to cost the NHS in Scotland £94.1 million (equivalent of £18 per head of the population per year)⁵, with the burden of disease caused by this physical inactivity more readily experienced in deprived populations. Cycling is not only a highly effective and efficient way to increase rates of physical activity, it also helps to reduce the risk of many lifestyle diseases including cancer, stroke and heart disease, and helps to improve overall quality of life. Cycling and active travel should therefore be emphasised as an essential element of public health. We also welcome the recognition of the importance of place in the health and wellbeing of people.

Question 4 – What are your views on the role Public Health Scotland could have to better support communities to participate in decisions that affect their health and wellbeing?

It is important to acknowledge the role of the third sector in facilitating participation of communities in public health (decision-making). Paragraph 3.8 of the consultation paper states that it is important to “...re-orient the public health system to be more local-facing, engages communities and supports collaboration across the wider system.” The role of Public Health Scotland should include a focus to establish links with other health and community services. Good examples of this with regards to active travel and physical activity are The Wheel Being Project⁶, delivered by Bike for Good in partnership with the NHS, and Wheelness Inverness⁷, both of which get people cycling to improve their physical and mental wellbeing, and increase rates of physical activity. The projects offer social rides and one-to-one support that help connect people to their local community and address isolation in the community. The projects are also used as social prescribing/signposting initiatives, with GPs able to refer patients onto the programme who would benefit from a non-healthcare focused intervention. Through programmes such as this, cycling, as part of the public health agenda, can be used as a tool to empower communities.

As acknowledged in paragraph 16 of the consultation document, public health is not a self-contained subject. Important linkages to other sectors and policy areas, such as transport, need to be recognised and properly considered/accounted for. As outlined in our response to question 1, a central focus of the Public Health Scotland body should remain addressing inequality and inequity in health outcomes, for both individuals and communities.

Question 6

a) How might the data and intelligence function be strengthened?

⁵ <http://www.healthscotland.com/uploads/documents/20437-D1physicalinactivityscotland12final.pdf>

⁶ <http://www.whatsonglasgow.co.uk/listings/wheel-being-glasgow/>

⁷ <https://www.cyclinguk.org/press-release/new-wheelness-project-improve-health-and-wellbeing-getting-people-cycling-inverness>

The data and intelligence function could be strengthened by identifying, utilising and linking up with data held by organisations in other sectors.

Question 7

a) What additional outcomes and performance indicators might be needed?

An outcome on addressing inequality and/or inequity is required.

Question 8 – What are your views on the functions to be delivered by Public Health Scotland?

The range of functions to be delivered by Public Health Scotland should be managed in a coordinated way to ensure that all functions are maintained and operate effectively and concurrently. An integrated, joined-up approach is required. We welcome recognition that a coordinated, whole systems approach is required.

In addition, there should be a function which directly accounts for and measures delivery against each of Scotland's six public health priorities, as these are the key drivers of Scotland's public health policy, and so should be closely aligned to the functions of the national public health agency.

We note that under the 'Management of any services...' function, tackling health inequalities is listed as a core service and activity of Public Health Scotland and this is welcome.

Question 14

a) What are your views on the size and make-up of the Board?

We note the intention that the Board will include individuals with academic and third sector experience. Specifically, we would like to see reference to active travel sector/organisations (and transport more broadly) as one of the key groups to be included in the Board membership, given the significant relationship between transport and (public) health outcomes, as well as the significant positive contribution that active travel can make to improving a range of health outcomes.

Question 15 – What are your views on the arrangements for data science and innovation?

There is a wide range of evidence which outlines that cycling and active travel make a strong positive contribution to social, health (both physical and mental), economic and environmental outcomes. It is important that this is recognised and addressed in data processes, where these are used to inform decision-making.