Wednesday 6th February 2019

Rights into Reality: Human rights and community-led health conference



This year we welcomed 120 delegates to our conference for a day of discussions and workshops around human rights and community-led health, exploring how we can use human rights-based approaches in our work.

Off to a great start

Our chair Iain Stewart Manager of Edinburgh Community Food and Chair of Edinburgh Community Health Forum



Iain introduced himself and the varied roles he has, describing each of these roles as having "Communities at the heart of it" and specifically in his most current work, that Food and Human Rights are to the fore of what he does.

Key speaker

Judith Robertson Chair of Scottish Human Rights Commission

Judith provided an overview of the range of Human Rights documents and legislation which relate to both Scotland and the international context. Whilst recognising that some nations are failing their citizens" she reinforced the fact that these rights are "indivisible and extend to us all" although they can be 'qualifiable' and she used the example from the UK that prisoners lost the right to vote.



We wouldn't have health inequalities in Scotland if we fully met our human rights obligations





John began the workshop with a brilliant presentation on the work he's been doing in Highlands to have disabled people's rights recognised and engage disabled people in a variety of decision making processes.

John's overview of all the current policy areas and drivers for human rights and community engagement was impressive, and he joined so many dots with his analysis. But even despite all his concerted efforts to organise and engage disabled people and disabled peoples organisations (DPOs) which is great, there is still a lack of engagement and recognition from formal partnerships and public agencies.

#RightsIntoReality



Wendy Halliday Assistant Director of SeeMe

Wendy provided an overview of the work of the organisation highlighting that
SeeMe is part of a national partnership working to promote human rights based approaches in policy and practice.

She explained that as the national programme to end mental health stigma and discrimination, human rights will be an important part of the SeeMe's work in the future: in particular to influence improvement and change, based on the experiences of and suggestions from people with lived experience of mental health problems.





Housing, Human Rights and Health: taking a rightsbased approach to campaigning for improved housing in Leith





WPCRA was one of a group of tenants who took a rights-based approach to campaigning for improved housing in Leith, Edinburgh. The group based the case they made to City of Edinburgh Council on the right to adequate housing. Their campaign continues, but Heather can already point to the benefits the work has had, including improved health outcomes.

Heather introduced the work of WPCRA, and a video was shown of the work, which led into a discussion about what community-led health organisations can learn from this approach.

Key resources can be viewed by clicking below:

- The video commissioned by the Scottish Human Rights Commission (SHRC)
- Background info on the right to housing from SHRC
- · Article on the project in Scottish Housing News



This workshop used a story dialogue approach to sharing Ahlam's 'story' of her experiences of leading Freedom From Torture's healing neighbourhood project. Speaking about her personal experiences, Ahlam said "I received support from so many others in Scotland and I just thought, I shouldn't keep that to myself, I should pass it on to other refugees".

The capacity and strength of human beings is immeasurable

-Workshop participant



Afternoon Workshops



Social Prescribing 'The right thing to do'

John provided compelling evidence for the rationale behind the Social Prescribing Project in which 25 well established community-led health improvement organisations in Scotland and Northern Ireland are currently engaged.



John argued that GPs under pressure find themselves with few options but to prescribe drugs to individuals who present with a 'help me' rather than a 'fix me' problem. Social prescribing provides GPs with the opportunity to explore alternatives for 'help me' patients.

2

A play, nae pie or a pint- Health issues in the Community

We were joined by the Douglas CC Health Issues in the Community (HIIC) group who performed their incredible play "She Died Waiting" an outcome of their HIIC group project on young people and self harm. It was a powerful performance. You can find out more about how the play came into being here.







We then heard about their experience of doing HIIC and the impact that it's had on their lives. They shared with us the doors that have opened for them to influence policy. Hear from the group themselves here.

Health Issues in the Community
The Douglas group

We now feel empowered and have our say all over Dundee & beyond, giving the benefit of our lived experience of mental health to the bigwigs.



Abi and Mark from Glasgow Community Food Network busted some myths about food insecurity by asking participants whether they agreed or disagreed with statements about why people experience food insecurity and whether a right to food is recognised and accepted – participants done well separating myth from fact in this exercise.

myth from fact in this exercise!

Frances Birch, NHS Health Scotland, went on to highlight policy initiatives and developments that recognise the amazing work being done by many local organisations, and encouraged participants to make their voice heard in the current legislative consultation to make Scotland a Good Food Nation.

You can add your views and strengthen our collective voice by making a submission here >>



The relationship between 'power' and health: sharing learning about empowerment as a public health intervention - learning from Wales and Scotland

Carol Owen from Public Health Wales (PHW) intrdocued a set of Principles of Community Engagement for Empowerment, which aim to guide effective community engagement practice in Wales. She focused on different forms of power that exist and describe how the Principles help us to think about the role of power in determining health and how that plays out in our practice.



Andrew then briefly introduced the Community Empowerment (Scotland) Act with examples of how it has been used in the context of community-led health. This led into a discussion about power and participation, and participants reflected on the opportunities and challenges arising from the above developments in Wales and Scotland.

