POVERTY AND SOCIAL EXCLUSION
IN RURAL SCOTLAND

A Report by the
Rural Poverty and Inclusion Working Group

September 2001
# CONTENTS

**EXECUTIVE SUMMARY** 3

**INTRODUCTION** 6

**SECTION A: IDENTIFYING AND TACKLING RURAL POVERTY AND SOCIAL EXCLUSION**

1. **INTRODUCTION** 9

2. **OVERARCHING ISSUES** 10
   
   2.1 **ACCESS TO SERVICES AND OPPORTUNITIES** 10
   
   2.2 **MAXIMISING HOUSEHOLD INCOME** 15
   
   2.3 **HOUSING** 23
   
   2.4 **HEALTH** 27
   
   2.5 **JOINT WORKING** 32

3. **LIFE CYCLE STAGES** 34
   
   3.1 **CHILDREN** 34
   
   3.2 **YOUNG PEOPLE** 36
   
   3.3 **FAMILIES** 38
   
   3.4 **OLDER PEOPLE** 41
   
   3.5 **COMMUNITIES** 44

**SECTION B: MEASURING RURAL POVERTY AND SOCIAL EXCLUSION**

4. **KEY ISSUES AND RECOMMENDATIONS** 49

**TABLE : SOCIAL JUSTICE MILESTONES AND INDICATORS** 55

**ANNEXES**

A. **SUMMARY OF RECOMMENDATIONS** 68

B. **REMIT AND MEMBERSHIP** 76

C. **SUMMARY OF CONSULTATION RESPONSES** 77

D. **CONTACT DETAILS FOR PROJECTS VISITED** 82
EXECUTIVE SUMMARY

1. There are 2 key messages from this Report.

1.1 Measuring the extent of deprivation, and progress towards tackling poverty and social exclusion is difficult in rural Scotland as the population is scattered and more heterogeneous than in urban areas, where there are usually concentrations of deprivation. Until now there has been very little hard evidence to measure the effectiveness in rural areas of policies designed to promote social justice. The Report recommends a comprehensive programme to measure rural poverty and exclusion issues, which should, over time, assist the effective delivery of policies in this area.

1.2 On the basis of evidence collected by the Group we believe that the effects of poverty and social exclusion in rural areas are similar to those in urban areas, but the causes of and solutions to poverty and social exclusion in Scotland’s rural areas can be very different. There is, therefore, a need to tailor the delivery of policies in rural areas to maximise effectiveness.

2. Our remit was “to improve understanding of rural social exclusion in Scotland, including ensuring that existing indicators are appropriately developed for and measurable in rural areas; and recommend ways of promoting social inclusion in rural areas.” We used as our framework the five life cycle stages within the Executive’s Social Justice Strategy – children, young people, families and working age people, older people and communities. Our approach recognised the diversity of rural Scotland, acknowledging that the needs of scattered island communities may be different to those of rural communities closer to urban settlements.

3. We undertook a review of existing documentary evidence and research. Our immediate conclusion was that the evidence base was insufficient to properly understand and measure rural aspects of poverty and exclusion. We, therefore, held an extensive consultation exercise, visiting a wide range of people, projects and service providers throughout rural Scotland, and organising a day of workshops on overarching issues, such as transport, equality issues and health. After studying the existing social justice indicators and following our widespread consultation, we were clear that simple, area based measures of poverty or exclusion, formulated on averages or absolute numbers on their own did not reflect the reality and existence of the issues in rural Scotland. Poverty and exclusion hurt people, whether experienced in a concentrated form or in isolation amongst relative affluence. Frequently, the cost of delivering services to alleviate poverty or exclusion is greater, per head, in rural areas than in urban areas. Service providers face a set of difficult choices in rural areas.

4. The recommendations contained in the report are set out in Annex A.

Understanding rural poverty and social exclusion

5. We initially used the Social Justice life cycle stages to assess their impact on people living in rural areas. It became clear that issues such as transport, economic development, housing and health cut across these stages. Three themes emerged which, while not exclusive to rural areas, were clearly more prominent.
5.1 **Access**: Some services are unsuitable for local delivery, either because of diseconomies of scale or the nature of the service. An affordable, accessible and flexible range of transport options is therefore essential, especially for people without access to a car. Lack of access to certain services, such as transport and childcare, can also restrict access to employment opportunities.

Public transport may not always be the best solution. Local service deliverers and communities themselves must consider alternative transport solutions. Community transport schemes provide an effective way of co-ordinating transport provision.

We commend to all service providers and communities SNRP’s recent report on Rural Service provision. This proposes that service delivery is approached in partnership and that service delivery strategies are devised with input from the local community. Cross cutting working should reduce costs and help decide the most appropriate point of delivery (local, mobile, central or remote).

5.2 **Higher visibility** in small communities is a force which can aggravate poverty and social exclusion for people experiencing problems with an associated social stigma, inhibit people addressing their situation and cause individuals to ‘hide’ problems from the rest of the community. Mental health, alcohol misuse, and accessing benefits were issues that were mentioned consistently to us.

Some groups – young offenders, drug misusers and lesbian, gay, bisexual and transgender people – may, by ‘reputation’, be excluded from social and employment networks by sections of the community they live in. There was reported hostility within sections of some communities towards projects which addressed ‘socially unacceptable’ issues.

5.3 A **culture** of self-reliance, especially amongst older people, might exacerbate poverty and social exclusion if people are too proud to seek help. There was a clear interaction of culture with visibility (“I don’t want my neighbour to know I’m experiencing problems”) in this.

**Tackling rural poverty and social exclusion**

6. We sought to identify existing good practice. Four main points emerged:

6.1 The planning of local services must involve service providers from all sectors (public, private and voluntary) and the community itself. Community Planning is the ideal vehicle for this. Local Economic Forums will take forward local economic development issues and should also be connected to the community planning process.

6.2 Recognition by funders and service providers that providing services for disadvantaged people in rural areas may require more resources per head and/or a different approach to delivery due to the scattered nature of rural disadvantage and associated diseconomies of scale.
6.3 The use of trusted cross-cutting or multi-skilled workers can facilitate access to help and advice for those who are experiencing a set of complex and deep-rooted problems.

6.4 Practical mechanisms to impart information to the rural public on services are needed. Service providers across Scotland should share information and examples of good practice.

Measuring rural poverty and social exclusion

7. There are difficulties associated with measurement in small, scattered and heterogeneous rural communities. Low income or disadvantaged people live alongside the more affluent. In the past there was a widespread view that people living in rural areas did not experience poverty and social exclusion to the same extent as people living in the concentrated conurbations of urban Scotland. This led to accusations of urban-centric approaches to addressing poverty and social exclusion, with an exaggerated focus on area-based policies. The use of some indicators – such as car ownership as an indicator of wealth – were felt to be inappropriate.

8. Our recommendations on data availability fall into short, medium and long-term categories:

8.1 **Short-term.** We found that many of the issues highlighted in the Social Justice milestones and indicators were equally applicable to people living in rural areas. However, no systematic analysis of an urban/rural split in these indicators had ever been undertaken. It was not possible in the time available to the Group to undertake such an exercise. We feel however that this is now absolutely essential. We recommend a rural-urban breakdown of all 29 social justice milestones.

8.2 **Medium-term.** Some aspects of rural poverty and exclusion such as access to services are not adequately addressed through the existing indicators. In addition the underlying data sources are not always capable of measuring a rural element, either because data cannot be broken down to give a rural and urban split, or because sample sizes are too small for meaningful analysis. Our recommendations, therefore, propose specific ways in which these issues can be addressed until small area measures are developed.

8.3 **Long-term.** In the longer term, we look to the Executive’s Neighbourhood Statistics initiative to resolve these problems.
INTRODUCTION

1. The Rural Poverty and Inclusion Working Group was established by Ministers in the summer of 2000 to “improve understanding of rural social exclusion in Scotland, including ensuring that existing indicators are appropriately developed for and measurable in rural areas; and recommend ways of promoting social inclusion in rural areas”. Our membership included representation from local authorities, local rural partnerships, NHS Boards, the Scottish Council for Voluntary Organisations, Scottish Homes, Highlands and Islands Enterprise and Scottish Enterprise.

2. We met for the first time in September 2000 and were asked to report to Ministers with our findings. The scope and complexity of poverty and social exclusion issues – coupled with a lack of existing information - led us to settle on a broad definition of rural poverty and social exclusion to avoid ruling out important issues at an early stage. In taking forward our work we drew on current knowledge, local experience and existing research, including the Scottish National Rural Partnership’s report, Services in Rural Scotland, which had significant overlap with the work of our group. We then applied it to our examination of the indicators within the Social Justice Milestones and used it to identify examples of good practice across rural Scotland. We also identified areas where data was insufficient and further research required.

3. We are conscious of the debate surrounding the definition of the term “rural”, although we do not think it would be fruitful to enter that debate here. Our approach has been to recognise the diversity of rural Scotland and we know that the needs of scattered island communities may be different to those of rural communities closer to urban settlements. Nevertheless, all rural communities have many common concerns and experiences. This has guided our approach and we would expect local agencies to implement policies in a way that is suited to each individual area. While exact definitions are not necessary to identify the main poverty and social exclusion issues in rural areas, we recognise that they are important to their measurement, and we address this matter in Section B of the report.

4. We used as our framework the five life cycle stages within the Executive’s Social Justice Strategy – children, young people, families and working age people, older people and communities. The social justice strategy, Social Justice...A Scotland Where Everyone Matters¹, has at its heart a recognition that strategies to tackle poverty and social exclusion should not focus on places alone, but should also be people-based. We feel that this approach is particularly appropriate for considering how poverty and social exclusion manifests itself in rural communities, where those in need may well be living next to their more affluent neighbours. We also identified issues, such as health and economic development, which cut across some or all of the life cycle stages and which we considered had specific rural dimensions.

5. Poverty and social exclusion are complex, multi-dimensional problems and, in our early meetings, we grappled with the definition of poverty and social exclusion which we would adopt, and how we would approach these issues in our work. We came to the conclusion that, while poverty could be defined purely in material terms, the term social

¹ Social Justice...a Scotland where everyone matters, Scottish Executive, November 1999
exclusion described a lack of access to the opportunities that enable an individual to have, or aspire towards, a decent standard of living. While low income poverty is probably the most commonly cited cause of social exclusion, wider social exclusion issues, such as health or mobility problems, lack of education and employment opportunities and discrimination, can lead to or perpetuate poverty. We think that poverty and social exclusion are inextricably linked in a cyclical process and have not, therefore, attempted to separate out these two issues within this report. In a rural context, lack of choice was also a force for exclusion. For example, while a lack of affordable or accessible public transport may not, in itself, exclude individuals who have a choice of transport from education, employment or social networks, a lack of viable transport alternatives, such as the use of a car, may do.

6. We also wanted to consider issues affecting groups who suffer injustice or are excluded from the community, for example equality groups\textsuperscript{2} or substance misusers. It is essential that policy makers both nationally and locally consider the impact of policies on such groups in rural areas and identify any specific needs. The organisations responsible for responding to the recommendations in this report should consider against each recommendation what the impact is likely to be on these groups in rural areas. The visibility of an individual’s situation in rural communities and the attitudes of the community itself can intensify an individual’s sense of exclusion from the community and have implications for the delivery of services in rural areas. These issues are also addressed within this report.

7. There is significant interplay between these issues in rural areas and, while we have endeavoured to explain the interaction between these factors in a rural context, we recognise that further work will be necessary to draw out the complexity of some of the issues we raise.

8. We adopted various methodologies in taking forward our work. We heard from a range of experts at our meetings and through workshops and undertook a programme of visits throughout rural Scotland. The visits were themed around the social justice life cycle stages and took in a wide variety of rural areas, from Shetland to the ex-mining communities of Upper Nithsdale. The purpose of these visits was to identify the challenges facing rural communities experiencing poverty and social exclusion, and to observe good practice in addressing these issues at the local level. To this end, we held consultation meetings with service providers and people who dealt with or experienced poverty and social exclusion on a daily basis. Annex D gives details of the projects visited. We also issued a consultation letter to a wide variety of organisations. A summary of responses is attached at Annex C. We would like to thank all those who gave their time and expertise to assist our work.

9. Our report has two sections. The first section (A) looks at a range of overarching issues both individually and within the context of the life cycle stages. It summarises the main barriers to social justice in rural areas and suggests good practice that can be used to overcome these barriers. It also identifies areas where further investigation is required. Illustrative quotes and specific examples of good practice, which could be replicated elsewhere, are contained in boxes throughout the first section of the report. The second section (B) considers data availability and suggests amendments to the indicators and underlying data within the social justice milestones so that they are able to measure the rural aspect of poverty and social exclusion.

\textsuperscript{2}The term ‘equality groups’ covers people who may experience inequality because they are disabled, come from a minority ethnic group, are lesbian, gay, bisexual or transgender, or because of their gender.
10. This report does not aim to give definitive solutions to all poverty and social exclusion issues in rural Scotland. Indeed, it would not have been possible within our reporting timescale. Rather, the report identifies the main issues and outlines general good practice in taking forward work to tackle rural poverty and social exclusion. It sets out specific recommendations for action, identifies areas which require further research and, in Section B, makes tangible and achievable recommendations which will enable the Executive and others to measure progress towards achieving social justice in rural Scotland. While we have outlined issues to be taken up by a range of public bodies, we recognise that some of the best solutions are devised by communities themselves.

11. The report does not set out to paint a bleak or depressing picture of rural areas and should not be construed as doing so. We certainly saw in our work and investigations, economic problems facing several industries and sectors important to the economy in rural Scotland. Our work was not, however, intended to identify specific solutions to these difficulties. Nor are these industries, such as farming, fishing, tourism and textiles, the only important sectors of the economy of rural Scotland. In our work we identified areas of tremendous strength, energy and opportunity in many rural communities. Taken as a whole, rural Scotland is neither an isolated poverty-stricken backwater nor an area of tremendous affluence. It is a diverse and integral part of Scotland with advantages and disadvantages. We hope our report will contribute towards alleviating these disadvantages.
SECTION A: IDENTIFYING AND TACKLING RURAL POVERTY AND SOCIAL EXCLUSION

1. INTRODUCTION

1.1 Many of the root causes of poverty and social exclusion are the same wherever people live, urban and rural settings alike. However, we identified 3 key themes – Access, Visibility and Culture – which we felt straddled almost all other issues. We believe that on their own or combined they compound the common factors, causing poverty and social exclusion, and making disadvantaged people in rural areas seem doubly excluded. These themes are interwoven throughout the report.

1.2 Access to key services is the issue which is widely accepted amongst rural communities as being the major cause of social exclusion. Access as an overarching theme covers access to services, employment and social networks. It also includes transport issues, and the high unit cost of provision in rural areas, and the time and cost involved for the individual travelling to access services. For those who are reliant on the availability of key services, access can mean the difference between a mere existence and a fulfilling life, between poverty and a decent standard of living.

1.3 In this report we use the term visibility to describe the conspicuous nature of people’s problems within rural communities. Sometimes visibility can be beneficial and lead to early identification and resolution of problems, but it is a double-edged sword. In an urban area it is easier to achieve anonymity when accessing services to address personal problems, such as accessing benefits or mental health services. In rural areas, those who have to access such services are very visible within the community. Many will hide their problems rather then risk being stigmatised or labelled. This has implications for the way in which services are provided to rural dwellers and, when coupled with sparsity of population, leads to significant statistical difficulties in measuring the extent of poverty and social exclusion in rural areas at a national level – an issue which we address in section two of this report.

1.4 Culture is an important factor in determining how people approach and react to the issue of poverty and social exclusion. Although there are many cultural traits that are common to both rural and urban areas, we believe culture can vary between urban and rural communities, and indeed across rural communities. This has both positive and negative effects.

1.5 When these three themes interact negatively, it is a combination that can act as a powerful force for social exclusion, further excluding those who are already income poor or face other forms of social exclusion within their lives. In the remainder of this section, we look in more detail at access issues and report on some of the other key factors which may contribute towards poverty and social exclusion in rural areas, at all ages, or at particular life cycle stages. We visited many projects and saw some excellent examples of good practice which are highlighted throughout this report.
2. OVERARCHING ISSUES

In this chapter, we comment on issues that we have identified as being common to all of the life cycle stages and, to a greater or lesser degree, all rural communities. We document the main issues and suggest areas of good practice, which could be more widely disseminated.

2.1 Access to services and opportunities

2.1.1. We were aware that our own study was being taken forward in parallel with the work of a sub-group of the Scottish National Rural Partnership (SNRP) who were investigating the provision of services in rural Scotland. The SNRP presented its report, Services in Rural Scotland to Ministers earlier this year. The report mainly considered non-statutory services and, in this context, identified village shops, banking, post offices, petrol stations, village halls, childcare services and services for young people as being the most important services for rural communities. Many of the findings and recommendations contained in this report are also relevant to our own work, and we endorse them.

2.1.2. While recognising the applicability of the SNRP’s report to our own work, we felt that there were particular issues relating to accessing services in rural areas which we needed to address ourselves. In particular, we wanted to look at the provision of some statutory services and the provision of services to excluded groups.

Local access

2.1.3. It is particularly important for those experiencing poverty and social exclusion in rural areas to be able to access some services in their own communities, since they are often less likely to be able to travel to access services in other locations. It is important that mechanisms exist to allow those living in rural communities, and especially those who have little choice but to access services locally, to engage with providers of key services about the appropriate level and method of service provision. They need to have the opportunity to influence decisions about which services should be provided locally and which services people are prepared to travel to, with some agreement about what is a reasonable distance to travel.

“There was one man who said that everyone in the community got to know of his mental health problems when they saw the car belonging to the community nurse parked outside his house.”

Community worker, Shetland

2.1.4. These discussions should acknowledge the issues of stigmatisation and visibility in rural communities and recognise that solutions may differ from urban models of provision. Visibility plays a substantial role when considering the delivery of specialist support services (or any confidential service) in rural areas. While it may be desirable to deliver certain services into rural communities, rather than at a central location, the service should be delivered in such a way that clients do not feel stigmatised.

Firth and Mossbank Enterprise on Shetland offer peripatetic services at their ‘community house’ – an empty house which was converted for use by the community. Services offered include GP services, benefits awareness, sexual health, mental health and substance misuse clinics. They try to run some of these clinics at the same time so that it is not obvious to the rest of the community why people are visiting the community house.
2.1.5. Examples of service provision, which are applicable to the public, commercial and voluntary sector and do not require travel out of the community, include:

- local provision - this might include the sharing of facilities by more than one retailer or organisation, the use of locally based, multi-skilled workers who can provide advice and support on more than one issue;
- mobile provision - for example, employing outreach staff or professionals committing a proportion of time to delivering their service outwith their main office. We support the SNRP’s recommendation that service providers should assess the potential to provide mobile specialist services, such as GPs, either on their own, or jointly with others; and
- remote provision through Information and Communication Technologies (ICT), for example the provision of information, advice or training via the internet, telephone and video-conference facilities.

2.1.6. We saw many examples of the important role played by the voluntary sector in the delivery of services in rural communities. In addition to their core work, local voluntary projects often provide additional services to rural communities, such as information on benefits or healthcare. This was attributed to the fact that voluntary workers can gain people’s trust over a period of time and we were told that this can be an especially effective way of reaching older people. Although projects are keen to offer such services, they often have little spare capacity to deal with additional issues. We recognise that this may also be the case in some urban areas. However, because of the absence of services in many rural communities, there may be scope for service providers to maximise delivery of key services by making greater use of existing voluntary sector projects to deliver services, or information on available services, on their behalf in rural communities.

2.1.7. It is important to recognise the need for services to be available locally. However, rural dwellers still have to travel to services which can only feasibly be delivered from a central location, such as hospital provision, or to access a wider choice of retail or leisure facilities than could ever be delivered in most local villages or small towns. Some services require complete discretion owing to the extremely sensitive nature of the problem, such as domestic abuse or rape crisis support services, which clients may prefer to access outwith their local community.

Accessing centralised services

2.1.8. Throughout our programme of visits, rural communities frequently cited transport as *the* over-riding problem in rural areas and access to services was viewed as a simple issue of access to transport. Some identified the expense of rural transport as a direct cause of poverty. Other problems raised on our visits include:

- the lack of frequent, appropriately timed and affordable public transport;
- a perception that spare capacity on existing publicly owned transport could be better used in fulfilling local transport demand;
- car ownership is often a prerequisite for accessing employment and services, but the overall cost of motoring is higher in rural areas;
- older people (especially older widowed women who have always relied on their husbands to drive) are particularly disadvantaged in terms of ability to drive and car ownership;
- lack of patient transport to hospital appointments; and
- a decline in petrol stations and vulnerability of remaining stations.
2.1.9. On our visit to the Better Government for Older People pilot in the Scottish Borders, we also heard that the closure of rural banks and post offices impacts not only on the ability of older people to gain access to their money, but eats away at available income due to costs of travelling to towns to access banking services. We suspect that this issue affects many on low incomes who have to travel to access benefits.

2.1.10. Although we recognise that all of these issues are valid areas of concern, we felt we needed to challenge the perceived problems and to test whether the proposed solutions are valid for excluded and poor people in rural areas. For example, making it easier or cheaper for most people to travel further afield may undermine local services, which may make things worse for those who find it difficult to travel. We also wanted to consider the impact of any measures suggested – are they benefiting those who suffer poverty or social exclusion, or are they merely providing support for an individual’s life choice? Such preconceived ideas can distort discussions at community and local government level, ruling out options that may be appropriate before they are even considered.

2.1.11. In addition to the points above, we recognise that the high unit cost of providing public transport in rural areas means that it will never be possible to offer a service that meets everyone’s transport needs. One alternative lies in Community Transport schemes, which have successfully addressed many travel needs. Such schemes can ‘join up’ existing services to public transport routes or fill gaps in transport provision. They can also co-ordinate use of existing vehicles to maximise usage. Because such schemes are run by the voluntary sector, it is important that they receive adequate financial and in-kind support from local agencies that have an interest in developing local transport provision.

2.1.12. We considered the provision of non-emergency patient transport services for travelling to hospital appointments. The Scottish Ambulance Service is the main service provider, responding to requests from GPs and other clinicians. Where a clinician concludes that ambulance transport is not justified, there are 2 statutory patient travelling expenses schemes that they can recommend to patients - a non-means tested Highlands and Islands scheme, and a means tested scheme for the rest of Scotland. The schemes are aimed at those who face high travelling costs because of remoteness or who are on low incomes, providing reimbursement of travelling costs incurred by the patient, and, where medically necessary, by a companion, to attend hospital.

2.1.13. Notwithstanding these arrangements, during our visits we heard about gaps in service provision with patients facing huge expense and long, uncomfortable journeys to get to hospital using taxis and buses, which are not always accessible. We were told that this can particularly disadvantage people who may have persistent health or medical needs, who need support in accessing health care the most. We understand that the Scottish Ambulance Service plans to initiate a major external review of the non-emergency patient transport service in 2002. We urge it to carry out the review in co-operation with local transport and service providers. We believe partnership working provides the best means of identifying and meeting overall service needs.
The Buchan Dial-a-Community-Bus scheme in Maud, Aberdeenshire, runs two minibuses: one provides door-to-door community transport for the local community through a dial-a-bus scheme; and one is hired to community groups. The cost of running the service is met through grants, private sponsorship, assistance in kind and volunteering. Timetables are drawn up by consulting community members on their preferred travel destinations over a 3 month period. People then telephone to book a place on the bus, which picks them up at their door and travels to a fixed point destination. The project relies on volunteer escorts who provide assistance to clients who are mainly elderly or disabled. There are 2 part time paid drivers and a team of volunteer drivers. The scheme has also secured funding to run a patient transport service for the community, which does not receive a non-emergency service.

2.1.14. We found that existing publicly owned transport is often not used to its full potential. This includes spare capacity on existing routes and transport which is only used at specific times of the day and otherwise lies idle. Alternative and additional uses for these vehicles should be considered as a means of alleviating exclusion by enabling greater access to services in rural areas. The resources invested by health services and local authorities in rural transport, through their different departments, should be examined to provide comprehensive community based access to services, including access to transport when necessary.

**Information and Communications Technology**

2.1.15. The development of ICT based solutions has potential for helping to overcome social exclusion and poverty. Rural areas can benefit from electronic service delivery, which can reduce the barriers of cost, distance and time, enabling easier access to public and retail services, and education and training opportunities. It also allows communities and individuals to access networking opportunities. In addition, teleworking is now a real possibility for some people, increasing the number of choices that both workers and businesses have, especially in rural areas. We note that both the UK Government and the Scottish Executive are committed to having all public services which can feasibly be delivered electronically available online by 2005. In addition, the Modernising Government Fund is supporting a number of pilot projects, including 6 rural projects, across Scotland, most of which involve joining up service delivery based on citizens’ needs.

2.1.16. There are many good examples of locally based projects which seek to improve the ICT skills of the community and we recognise the potential of such schemes to open doors to further education and training, and employment; to enhance economic development; and to access social and community networks. It is too simplistic, however, to believe that ICT will solve all of the difficulties facing rural communities. One of the first barriers to be overcome is to publicise the existence of ICT services and encourage local communities to use them. There is, therefore, a need to develop an extensive and accessible infrastructure, backed up by training and mentoring programmes. Sustaining such ICT systems can also prove to be difficult. Agencies working in rural communities may benefit from joint development of systems, which would include assessment, service planning and monitoring.

2.1.17. We note that the resources committed by the Scottish Executive are helping to widen access, improve skills, deliver services, and create demand. To build effectively on the opportunities it is important that the Executive’s Digital Scotland Unit continues to work with partners in the private, public and voluntary sectors to ensure that Scotland has the right skills, a world class telecommunications infrastructure, and affordable access for all to digital
technologies. Our concerns in relation to the telecommunications infrastructure and affordability are addressed in paragraph 2.2.14, below.

**Recommendations**

**R2.1.1 Communities and local service providers**, including **local authorities**, **NHS Boards**, the local representatives of the **Employment Service** and **Benefits Agency**, and **local enterprise companies**, should engage with rural communities, through the community planning process, to plan the provision of key services and draw up a strategy for local delivery. In doing this they should:

- consider when transport should be provided to services and which services can be accessed locally (i.e. brought to the community);
- ensure that services are delivered in a way that is sensitive to the visibility of accessing services within the local community; and
- consider supporting the diversification or expansion of local voluntary schemes to provide services which alleviate poverty and social exclusion.

**R2.1.2** Each **local authority**, **NHS Boards**, the **voluntary sector** and the **Community Transport Association** should come together with local communities to carry out an audit of existing transport provision for local communities (including provision contracted from private operators) and consider whether the best use is being made of existing transport. This should include:

- ensuring that current transport provision is timetabled to maximise access to education, training, employment and essential services; and
- an audit of existing vehicles and transport routes with a view to greater transport co-ordination to maximise usage.

**R2.1.3** The **Scottish Ambulance Service** should assess, in co-operation with other service commissioners and providers, the current level of provision of services in and across rural areas and how these might be improved. These considerations might include:

- a study of levels of service provision in different areas of rural Scotland; and
- the identification of existing good practice.

**R2.1.4** The **Scottish Executive** should, contingent upon the findings and recommendations from **R2.1.3** above, issue a leaflet to clinicians who consider the transport requirements of patients. The leaflet should give details of the travelling expenses schemes available, and encourage clinicians to bring these schemes and local community patient transport schemes to the attention of their patients.

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3 The Executive should approach the Department for Work and Pensions regarding recommendations for the Employment Service and Benefits Agency. This applies to recommendations throughout the report.
**R2.1.5** Communities and equality groups should engage, through the community planning process, with service providers (including local authorities, NHS Boards and the Scottish Ambulance Service), transport operators and the Community Transport Association, to ensure that adequate transport provision is made for disadvantaged groups within the local community. The following issues should be looked at:

- reduced fares for low income groups;
- accessible transport for those with mobility problems; and
- affordable patient transport.

### 2.2 Maximising household income

2.2.1. We consider economic development to be the most effective factor in the alleviation of poverty because of the employment opportunities it creates, and the knock-on effect throughout the local economy. Recognition that the economic conditions and employment patterns can differ in rural areas is essential to the formation of sustainable economic development strategies, and there are many examples of innovative approaches in rural communities where standard urban solutions have proved to be unsuitable. However, there are inevitably individuals who do not benefit directly from economic development, for example, those who work in low paid employment or are unable to work. For such people, it is essential that support systems are in place to ensure that they are able to maintain a reasonable standard of living. The national minimum wage, 10p tax rate, tax credits and reasonable benefits levels are all important means of reducing financial exclusion. It is important to enable people to take advantage of the benefits offered by economic development by increasing access to education and training opportunities which will make them more attractive within the employment market.

### Employment and economic development

2.2.2. In assessing the impact that economic development has on rural poverty and social exclusion, we considered existing statistics and research, and anecdotal evidence. This suggested that there is a prevalence of low skill, low paid employment in rural areas, which may be seasonal and is often part-time. A lack of suitable public transport may reduce access to wider employment markets, limiting the jobs available to people and increasing competition for low paid and low skill jobs within the immediate locality. In our investigations, we came across little to challenge this picture of rural employment markets. However, we note that little evidence exists, and we recommend that further work is undertaken to assess rural employment markets.

2.2.3. Rural areas have a lot to offer employers. They often boast a clean environment and pleasant living conditions for employees, as well as skilled and sometimes captive workforces. While certain business costs can be higher in rural areas, other overheads, such as office accommodation, are inexpensive compared to urban areas. We found, through our visits, meetings and workshops, that the main issues in rural areas from an employer’s perspective are:

- the complexity of rural economic and employment issues, which we found to be interdependent, and often subject to seasonality and difficulties with quantitative measurement;
• a recognition by various agencies that, while joined-up approaches are needed to address these complex issues, this need is not always matched in reality at present;

• access difficulties and transport costs associated with certain types of industry, notably manufacturing, sometimes makes it difficult to attract such industry to rural areas; and

• a reliance on large-scale industry to provide employment in rural areas, sometimes led to a lack of support for small-scale and community enterprise.

2.2.4. We would urge Scottish Enterprise and Highlands and Islands Enterprise to build upon recent successes in attracting inward investment to rural areas and to continue to sell rural areas as prime locations for a range of industries. Small businesses are crucial to the sustainability of the rural economy and we strongly support work underway to encourage entrepreneurship and small business development in rural areas. Specific support to encourage inward investment and local business development in rural areas should be built into the operating plans of Scottish Enterprise and Highlands and Islands Enterprise.

2.2.5. Networks. We discovered that gaining physical access to employment is sometimes problematic in rural areas. Public transport does not always run at times that are convenient to get to work, especially for jobs that do not coincide with normal office hours. Given the reliance of many rural areas on processing industries, which often involve shift work, there may be a real constraint on development. For those who need a car to get to work, we observed the potential for a vicious circle of ‘no car, no job; no job, no car’ to develop.

2.2.6. We found that social and informal networks are valuable to employers and employees who wish to access information on the local labour market. Individuals who are excluded from these networks can face barriers to gaining employment and growing a career. Informal networks can also prejudice employers against those in a small community who have experienced problems at some point during their life. Those without access to informal networks may, therefore, find it hard to access opportunities for employment and progression, while others with access to such networks become more competitive in the labour market.

2.2.7. We think that these issues may have increased significance for disabled people in rural areas. We know that, statistically, disabled people are more likely to be out of work and reliant on benefits. In particular, disabled people with reduced mobility, in terms of both access to transport and workplaces (given the large proportion of small businesses in rural areas), may face more difficulties in gaining employment. It is possible that other equality groups may be excluded from employment networks in rural communities. A recent report by the Commission for Racial Equality indicates that minority ethnic groups in rural areas also face specific employment problems. We understand that the Disability Discrimination Act will address some of the employment issues that face disabled people. We recommend that research is carried out on this as part of a wider study on equality groups in rural areas (see R3.5.3).

2.2.8. Childcare. On our visits, lack of access to suitable childcare was also cited as a barrier to accessing employment in rural areas. The parents we spoke to generally welcome the Executive’s commitment to offer two hours free pre-school provision daily for all three and four year olds. However, a lack of qualified childminders, coupled with the difficulty

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and expense of accessing both pre-school and childcare provision, means that it is difficult for many parents, especially lone parents, to gain suitable jobs. The use of school transport to take younger children to pre-school care was cited as a means of enabling parents to gain part-time employment by reducing the amount of time spent travelling to access provision. However, others felt an hour-long bus journey may be too daunting for young children.

2.2.9. We identified two main barriers to rural childcare providers: diseconomies of scale in many rural areas; and fluctuating demand because of the nature of rural employment (seasonal work and work reliant on weather conditions were given as examples). Our visits to Local Childcare Partnerships also confirmed that it is difficult to identify qualified or potential childminders. There are, however, examples of good practice within the Childcare Partnerships, some of which tackle staff shortages by turning childcare from a barrier to employment, to an employment opportunity, promoting it as a career and offering training opportunities to parents.

In Shetland, we visited the Shetland Childcare Partnership (SCP). SCP deals with the age group 0-18 years and had four sub-groups to tackle special needs, transport, training, and funding. They fund two peripatetic health visitors and a play van. A survey recently undertaken by the SCP identified that many people in Shetland are relying on childcare that they are unhappy with and there is a demand for childcare services, but it is often difficult to recruit and retain qualified staff. The Partnership are, therefore, pro-active in persuading local people to train to SVQ II (available via distance learning) – the minimum level of training required to become a registered childminder. They found that the local grapevine is a useful source of information on potential childminders who SCP then approach direct.

2.2.10. Employer perspective related to choice of employee. We heard that recruiting and retaining qualified workers can be problematic for employers based in remote or rural areas. The local labour market may not offer the experience or skills needed and it is difficult to attract workers to some rural areas, or to get them to stay for more than a couple of years. In industry, it can deter companies from locating in rural areas or cause existing companies to move jobs to an area where there is a greater choice of employees. In the public sector it can limit the ability to provide services locally. This is a particular problem in isolated rural areas, and the use of measures such as distant islands allowance does not seem to be filling the gap.

2.2.11. A dual approach to local economic development. Where there are high paying inward investors, they often have their pick of staff in rural areas. While this benefits some living in the area, it may cause disturbance in the jobs market. The impact on other employers may be a higher turnover of labour, which can cause reduced profitability. Heavy reliance on incoming employers can also leave rural areas vulnerable to market change. A small number of redundancies can have a significant impact on a small rural community and, in economic terms, may create the same problems as a much larger scale redundancy in a town or city. We believe that a dual approach of growing and supporting the local economy, including small-scale and community enterprise, as well as encouraging inward investment, is essential to sustainable development within the local economy. We, therefore, welcome the publication of A Smart, Successful Scotland: Ambitions for the Enterprise Networks by the Executive and recommend that the Scottish Enterprise and Highlands and Islands Enterprise convene a meeting at the earliest opportunity to formulate a long-term strategy which builds upon social justice and rural development policies to encourage the growth of sustainable rural economies.
We visited Wigtown in Dumfries and Galloway, which is now marketed as Scotland’s National Book Town. Wigtown has a population of 1,100 people, with an estimated population of up to 6,000 people living in the nearby area. The 1980s and early 1990s saw economic decline in the area, with the closure of two creameries and the local distillery. In response to this economic decline, the Wigtown Book Town Company was established to sell Wigtown as a destination for literary tourists. The project, which is part financed by the Dumfries and Galloway Council, Scottish Enterprise Dumfries and Galloway and the Dumfries and Galloway European Partnership has stimulated considerable growth over the past 2-3 years. The incomes from the 23 book-related businesses now support around 40 employees, and there are spin-offs to local restaurants and tourism. This is an unusual solution to the area’s economic problems that might not be suitable for all parts of rural Scotland, but demonstrates the benefits of innovative thinking.

2.2.12. *Getting people back into employment.* The Employment Service told us about the New Deal Rural Issues sub-group, which offers advice to the New Deal Advisory Task Force for Scotland, on the operation of the New Deal in rural areas. We also heard about work between the Employment Service and the Federation of Small Businesses to develop flexibilities within the New Deal to reduce the burden of operating the New Deal on small businesses. We understand that there is also scope to make further use of existing flexibilities within the current New Deal framework, and the Employment Service is encouraging employers, who may be placing unnecessary restrictions on themselves at present to do that. Local offices of the Employment Service are also running a number of rural good practice pilots. We feel that there is a need to evaluate these pilots and to establish a means of disseminating good practice throughout the Employment Service.

Recruit Sutherland is a labour market initiative to encourage business expansion through employment growth. It is a multi-agency project involving Highlands Council, Highlands Opportunity Ltd, Highlands & Islands Enterprise, Caithness & Sutherland Enterprise, Federation of Small Business, the former Employment Service and the Inland Revenue. A recruitment counsellor targets family and small businesses, usually of 5 employees or less, offering support for them to take on a member of staff. They liaise with the relevant agencies to enable the employer to find the right person; access financial support available through the various employment and training programmes; and help with paperwork, be it taxation, New Deal or other training programme administration.

2.2.13. *Peripherality.* We recognise that rural businesses can incur extra costs as a result of their peripherality and the associated costs, such as transportation, or gaining access to centralised services. It can also be difficult for rural businesses to access training for staff as courses are often run in urban settlements.

2.2.14. ICT opens up new opportunities - such as access to wider markets and training opportunities – which will enable many rural businesses to compete nationally and internationally on equal terms. Paradoxically the technology is often expensive to install, particularly in the remoter areas. This can present a twin challenge to rural business. Firstly, it can inhibit the growth of every business, regardless of its commercial specialism. Secondly, it can act as a disincentive to the attraction of new businesses, and especially businesses such as call centres and e-commerce. As broadband becomes the industry standard over the next ten years, this will be one of the major challenges to the economic development of rural areas. There is also uncertainty about the likely coverage of digital terrestrial and satellite broadcasting as we approach the switch off of traditional analogue
signals. We feel that ICT provision in rural Scotland merits particular consideration within the Executive’s Digital Scotland strategy. We support the development of policies that will increase access to new technologies and ICT infrastructure in rural areas, thus ensuring viable rural businesses which can compete on a level playing field.

2.2.15. We also welcome the research that has been commissioned by the Scottish Executive, Highlands and Islands Enterprise and Scottish Enterprise, which is looking at the implications of peripherality on business costs, and ways in which they can be reduced.

Benefit take-up

2.2.16. Many of the problems surrounding access to benefits found in rural areas are common to larger towns and cities. However, as with so many issues of rural poverty and exclusion, we found a common perception that the particular characteristics of rural life exacerbate the problems in a way that does not happen in larger town and cities. In particular, we found that problems of low benefit take-up are linked to visibility and distances from services.

2.2.17. Establishing the facts of benefit take-up. We found there was a widespread belief that the take-up of benefits in rural areas is lower than in towns and cities. We heard that people face difficulties in accessing information and advice on benefits because of a lack of local service provision or affordable transport. Visibility and culture also played a role. For example, we were told that in some communities, where there is an emphasis on self-reliance and a strong work ethic, there is a stigma attached to claiming benefits. While this may also be true in urban communities, we were told that the visibility of accessing benefits services in a small rural community heightened the stigma, with the result that some people would not claim. When we visited the Dumfries and Galloway Citizens’ Advice Service, they estimated that 70% of the claimants they saw do not get the full range of benefits to which they are entitled. The Department for Work and Pensions (DWP) publish statistics on the take up of benefit in Great Britain annually. However, current sample size restrictions mean that it is not possible to provide an analysis at rural or even Scotland level. Until the facts of benefits take-up in rural Scotland can be established, we believe that some of the actions that might be taken to deal with the perceived problem stand the risk of being ineffective or even counter-productive. We, therefore, urge that early action is taken by the DWP to establish the relevant facts.

2.2.18. Although it was not possible for us to prove whether the level of benefit take-up in rural Scotland varies significantly from other areas, we believe that there are issues related to benefits in rural areas that can be addressed at present.

2.2.19. The number of agencies and their benefits. There are many benefits delivered by a range of agencies:

- DWP (administered by the Benefits Agency and Employment service) – attendance allowance, child benefit, disability living allowance, income support, jobseeker’s allowance, incapacity benefit, industrial injuries benefits, invalid care allowance, maternity allowance, minimum income guarantee for pensioners, disability income guarantee, retirement pension, social fund and winter fuel payments for older people.
- Inland Revenue – children’s tax credit, working families tax credit and disabled person’s tax credit.
• Local authorities – council and housing tax benefit, social care (including home care),
funding for residential and nursing home care, free school meals and school clothing
grants.

2.2.20. We found a widespread belief that the number of benefits and agencies that deliver
them causes confusion to those who might be eligible to claim them. We felt that difficulty
with gaining physical access to agencies and other sources of advice strongly exacerbates this
problem in rural areas. The administration of many of these benefits is a reserved matter for
the UK Government, and others are the responsibility of local authorities. However, we note
that a major theme of both the UK government and Scottish Executive is to deliver more
joined up services and we particularly welcome the merger of the Benefits Agency and the
Employment Service to form Jobcentre Plus and the Pension Service from April 2002.

2.2.21. The complexity of benefits. We also found a belief that the complexity of individual
benefits deters people from claiming. Comments were made to us about the “red tape” that
surrounds claiming, an alleged tendency to bounce people back and forth between different
agencies or advice services, and the length of time from claiming to receipt of benefits. In
rural areas, where agencies are dispersed and distant from where people live, the impact of
these issues may be magnified.

2.2.22. Accessing benefits. As noted above, we found that getting to a place at which advice
and information on benefits is available was seen by people in rural areas as a major barrier
to take-up. Although helplines (such as the DWP’s national Minimum Income Guarantee
helpline) can be useful for obtaining information, as a welfare benefits officer said to us in
the Borders, “It can take an older person two to three hours to fill in a social security
application form, so doing it over the phone isn’t really an option.” Journeys to a town where
agencies or advice might be found can often be expensive, inconvenient, and time
consuming, sometimes taking a whole day. We understand that the DWP’s policy is to allow
claimants who incur travelling costs of over 80 pence per week, to claim costs of attending
benefit offices if a visit is unavoidable.

2.2.23. Benefit outreach work. The willingness and ability of agencies to conduct outreach
work in rural areas was seen by many as fundamentally important. We were made aware of
some excellent examples of good practice, for example the Benefits Agency visited
community facilities to conduct surgeries. Some rural local authorities also conduct welfare
rights campaigns in which other agencies participate. However, such practice is by no means
universal and we were told that, in many cases, it is limited by resources (staffing and
financial) and expertise. We also understand that, while some local Benefits Agency Offices
may evaluate their outreach provision, there was not a requirement for them to do so, nor a
systematic and routine evaluation of rural outreach activities at a national level. Such
activities can clearly add to the cost of outreach work per individual client. It is not clear
whether this additional cost in rural areas is reflected in resource allocation to area offices of
the relevant benefit deliverers. We strongly recommend that allocations should take account
of the higher cost of delivery of the service in rural areas.

2.2.24. The stigma of claiming benefits. Professionals we met in widely separate areas of
rural Scotland spoke of people’s reluctance to claim benefits to which they might be entitled,
especially in relation to older people who “rarely complained”. But it was also said to be
true, for example, in relation to parents not claiming free school meals for their children. The
reluctance to claim benefits was sometimes attributed to rural people’s natural resilience and
pride, asserted to be much greater than in towns and cities. But the stigma of claiming what was seen to be “charity” and the visibility of claiming in a small rural community where it is believed that everyone knows everyone else’s business, were also frequently cited reasons.

2.2.25. On one of our visits, we were told about a “benefits bus” that toured Upper Nithsdale. Although providing outreach services, it was not particularly successful in spreading awareness about the social security system. While occasionally seeing a familiar face helped to encourage people to talk about their financial situation with representatives, the high level of visibility of the bus deterred many others. This demonstrates the need for benefits providers to think carefully about how they provide outreach services to rural communities, for example delivering them at the same time and from the same venue as other services, so it is not obvious to the rest of the community which service individuals are accessing.

![Quote]

“Lots more children could [get free school meals], but the parents won’t apply.”
Head teacher, Argyll & Bute

“My boy had free school meals. But we had to stop it because all the other kids were taking the mickey out of him.”
Parent, Aberdeenshire

2.2.26. The impact of prices in rural areas. We found many references to high prices in rural areas, with a clear link to remoteness – the remoter the area, the higher the cost of many essential goods and services. We are pleased that the Scottish Executive, Highlands and Islands Enterprise and Scottish Enterprise have commissioned a rural prices survey for 2001.

Credit unions

2.2.27. We believe that Credit Unions are an effective means of providing low cost financial services to those on low incomes who may find it difficult to access commercial banking services. We note the report of the Group set up by the Scottish Executive to develop a National Development Strategy for Credit Unions in June 2000. In its final report the Group acknowledges the particular needs of rural communities when aiming to develop sustainable credit unions. The action plan recognises that success will look different in rural areas, with other avenues needing to be considered to enable access and provide a fixed base or collection points. The action plan also acknowledges the difficulties many rural credit unions face in recruiting and retaining volunteers, and highlights the importance of networking between volunteers in rural credit unions. The development of a specific rural volunteering initiative, which should include the establishment of volunteer forums in rural areas and take advantage of new technology for networking throughout rural areas, is recommended by the action plan.

Recommendations

R2.2.1 We recommend that the Scottish Executive undertake work to assess the nature of employment markets in rural areas.

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R2.2.2 We recommend that Scottish Enterprise and Highlands and Islands Enterprise should work together to develop a strategy to encourage the growth of sustainable rural economies. In doing so, we recommend that the following issues are considered:

- ensuring that Local Economic Fora are linked into the community planning process and that any review of local partnership working produces a holistic approach to rural economic development at the local level; and
- support for small-scale enterprise and community not-for-profit enterprise, which promote rural social inclusion and have the potential to create modest employment opportunities.

R2.2.3 Steps should be taken to address the lack of qualified childminders in rural areas; and assistance should be offered with training and provision of childcare services. We recommend that:

- local Childcare Partnerships and the Scottish Childminding Association work together to disseminate existing good practice on identifying and training childminders in rural areas;
- there is liaison between the Employment Service, Local Enterprise Companies and local Childcare Partnerships to identify potential childminders; and
- Local Enterprise Companies and the Scottish Executive should support the development of childcare services in rural areas as a direct means of employment; and to enable parents to seek employment.

R2.2.4 We recommend that the New Deal Rural Issues Sub-Group and the Employment Service take forward the following work to build upon the flexibility incorporated into the New Deal and:

- issue guidance which encourages employers to take full advantage of the flexibility incorporated in the New Deal; and
- evaluate local good practice and hold an annual event to disseminate rural good practice.

R2.2.5 We recommend that the Scottish Executive's Digital Scotland Unit should make rural issues a key consideration in the development of its broadband and digital inclusion strategies, and that the composition of the Digital Scotland Reference Group should ensure that rural interests are adequately represented.

R2.2.6 We recommend that the Scottish Executive approaches the Department for Work and Pensions to ask them to work with the Inland Revenue and CoSLA to develop strategies to maximise benefits and tax credit take-up throughout rural Scotland. In doing so, we recommend that the following be taken forward:

- research to establish the level of benefit take-up in rural Scotland, identifying particular groups who may be under-claiming;
- identifying ways of co-ordinating delivery of benefits through cross-cutting working, minimising the bureaucracy for those applying for benefits;
- considering how benefit providers can work more closely with the local voluntary sector to facilitate the dissemination of information on benefits available;
• regular evaluation of the best ways of reaching target claimant groups in rural areas, with resource allocations set by benefits providers taking the higher cost of delivery of the service into account; and
• dissemination of existing good practice on rural initiatives that have achieved an increase in benefit uptake, and a reduction in the stigma associated with claiming.

R2.2.7 We recommend that the Inland Revenue and local authorities should consider whether they should offer reimbursement to benefits claimants of expenses, where personal attendance at a central office is required in order for an individual to access benefits. All benefits providers should ensure that their employees provide advice to claimants about such schemes.

R2.2.8 We recommend that the Department for Work and Pensions and local authorities conduct a review to ensure that allocations of funding to offices servicing rural areas of Scotland take full account of the higher cost of delivering the service in rural areas, including outreach services.

2.3 Housing

Availability

2.3.1. Lack of affordable housing has been highlighted as a significant issue in rural areas. We note that the Rural Partnership for Change (RPfC), set up by the Executive to consider how to address shortfalls in social rented housing in pressured rural areas, has considered how to address many of the housing issues we observed on our visits to rural communities. There are two strands to the RPfC: a Highland pilot under the direction of the Highland Council and a National Steering Group, which considered how best the experience of the pilot could be rolled out across the rest of Scotland. The National Steering Group has defined such pressured rural areas as being:

"An area in which more households wish to live than there are permanent houses available of an acceptable physical quality for the purpose of providing primary housing accommodation."

We support this definition and note that the RPfC found that the level of rented housing falls as the size of locality\(^7\) decreases. This is even more marked for social rent housing. It is possible that lower levels of affordable housing can lead to out-migration, although more research on this issue would be useful.

2.3.2. We found that access to permanent accommodation is influenced by a wide range of complex factors, such as the availability of accommodation, its cost, proximity to services and employment, household income, the level of competition, and priority within housing allocation processes. This corresponds with the findings of the National Steering Group, which show that rural Scotland is not homogeneous, making an all rural analysis of the situation inappropriate. Their report provides an interesting and in-depth analysis of rural

\(^7\) A 'locality' is a spatial unit defined by the General Register Office for Scotland for the purpose of the 1991 Census (repeated for 2001).
housing issues, which are particularly significant for people on low incomes where the cost and location of housing (and consequently their ability to access services and employment) can have a significant effect on their available income.

2.3.3. We are aware of the discussion surrounding the effect of Right to Buy (RTB) on the social rent sector in rural areas. The RPfC found that, while there was a perception that RTB had reduced opportunities for those reliant on the social rent sector, the limited evidence available suggested that the impact may have been slight at a national level. However, the National Steering Group had concluded that not enough is known about the possible impact of RTB and recommended further research on this topic.

2.3.4. Some rural areas, often the more isolated ones, have housing lying empty. Again we recognise that the causes are complex. One possible cause is ‘population drain’. In one area, the cycle described to us was that tenants begin to leave the area as job opportunities diminish, leading to a drop in the level of local services. This can lead to a further downwards spiral, with people moving to (and creating housing pressure in) rural settlements with local services. We agree that ways need to be developed to assist in the effective and efficient development of housing in rural areas. We note that the National Steering Group focused this issue and emphasised the need to addressing underlying problems. We are also aware of the Executive’s Empty Homes Initiative, which provides funding to local projects to identify suitable properties and to bring them back into local use. We hope lessons learned from this initiative in relation to rural areas will be disseminated widely.

Cost of renting

2.3.5. We heard that social rent levels vary across Scotland and across local authorities. While urban local authorities have a higher average rent level than rural authorities, a greater proportion of rural authorities (29% compared to 22%) have average rent levels above the national average. As those requiring social rent accommodation are likely to be those with the lowest income, this is an important issue. However, the mix of problems and potential solutions vary from area to area and it is, therefore, essential that any assessment of the existence and nature of housing pressure and responses to it should take place at local level.

Carrick Housing Association in Dailly, South Ayrshire comprises various organisations including community councils, the tenants association, South Ayrshire Council and the LEC. Although there was not a long housing list in Dailly, a demand assessment carried out by the Association indicated that there was latent demand for special housing of various types in Dailly. A Council owned site was available and the Association worked with the primary care trusts and the Council, who made an assessment of transport needs and demand for other services likely to arise out of this new site. Working with Scottish Homes the Association built about a dozen homes of various types, designed so that they could be used by residents with or without special needs. This was an interesting example of local partners working, under the auspices of the Carrick Housing Association, with Scottish Homes to produce an innovative design suitable for use by people with or without special needs.

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Competition and priority within allocation processes

2.3.6. We found that, in some rural areas, housing pressure has been created by people moving into the area. This is particularly true of areas within commuting distance of urban settlements; and areas that are popular as a holiday or retirement destination. While we recognise that this can regenerate local economies and create employment, the resulting housing pressure sometimes has a detrimental effect on the local community, especially for those who are disadvantaged because of low income and/or other personal circumstances. In other rural areas we found that, while housing is affordable, there is little spare capacity owing to a lack of new housing within the area. In both of these cases, housing demand is not always accurately assessed through local authority housing lists and the capacity to deal with housing demand within a particular locality, especially adapted housing, was often limited.

2.3.7. The allocation processes operating in local areas can have a major effect on the ability of individuals to access affordable housing. We support the recommendation made by the RPfC to include annual letting plans in allocation policies.

Quality

2.3.8. We heard on our visits that the quality of housing in rural Scotland is a concern, especially amongst older people who own their homes, but cannot afford to carry out repairs. The RPfC report has indicated that the physical quality of houses in rural Scotland may, indeed, be a cause for concern, and we welcome the report’s recommendation that the Housing Improvement Task Force should look at this issue in more detail.

Homelessness

2.3.9. Homelessness is an issue more often associated with urban areas. However, it also affects rural communities. On our visits to homeless and housing projects, the common view was that, while the causes of homelessness in rural areas are largely the same as those in urban areas, the real issue in rural areas is the lack of options to allow flexibility of response and flexibility of support to help people out of homelessness.

2.3.10. Local authorities are required to secure accommodation for homeless households in priority need, and to provide advice and assistance to those who are assessed as non priority. The new Housing Act will place further statutory requirements on local authorities in tackling homelessness. We welcome this, and note that effective procedures will be put in place to monitor local authorities’ performance in these areas.

2.3.11. We found that, in practice, there are significant issues affecting the capacity of rural local authorities to respond to homelessness. A significant proportion of homeless applicants may spend time in temporary accommodation either while they are being assessed or, following assessment, while the local authority seeks appropriate permanent accommodation. Statistics show that priority households in rural areas are more likely than their urban counterparts to be placed in, and spend longer periods of time in temporary accommodation (63% compared to 51% in urban areas), and be placed in bed and breakfast accommodation (21% compared to 7% in urban areas)\(^9\). We believe that this demonstrates that the capacity to

\(^9\) DTZ Pieda and System Three Social Research (2000) *Homelessness in Rural Scotland* (Scottish Homes, 2000) based on local authorities with population density less than 300 persons per square kilometre.
address rural homelessness is diminished due to a lack of affordable housing, coupled with the high unit cost of delivery of services to address rural homelessness.

“There’s a lot of ‘couch surfing’ by young people - staying with friends and relatives a short while at a time.”

Homelessness worker, Aberdeenshire

2.3.12. We heard that a lack of social housing in some rural areas can lead to ‘hidden homelessness’ where people stay with family, friends or in temporary accommodation, such as caravans, rather than applying for social housing located at some distance outwith their ‘home’ area. Similarly, some of those who have been made homeless are placed in accommodation located in isolated areas with very limited access to services and support networks. This can make it costly and difficult to access services and employment, especially for those who are homeless because they are experiencing personal difficulties and need access to essential services.

2.3.13. Because of the high unit cost of delivery it is often difficult to provide targeted, ‘single issue’ services to homeless client groups. As a consequence of this, we found that single facilities and small staff complements (who are rarely trained to cope with a range of specific problems) often have to accommodate households with widely varying support needs - young people, substance misusers and people with mental health problems, for example. Therefore, while it is usually possible to address the immediate need for shelter, it is often not possible to address those issues which had initially been a factor in clients becoming homeless. This places strains on other households within the facility and on staff. It is important in these cases that there is joined-up provision of health and social services to support the needs of homeless people in rural areas.

2.3.14. Where temporary homeless accommodation is not available, it is not always easy to find short-term housing for certain groups - B&Bs and hotels can be reluctant to house people who are known to be disruptive. This can result in homeless people (especially young, single people who are often classed as ‘low priority’) moving to urban areas to get accommodation.

The Bridges Project in East Lothian is, in partnership with the local authority and others, in the process of establishing housing services in East Lothian. One of their projects is an information, advice and advocacy service for excluded young people. The primary function of the project is crisis resolution, but the service also aims to act as a crucial access point to a range of service providers. The advice service operates via a walk-in shop front in Haddington and includes a freephone advice line, provides consultancy to staff from other agencies and delivers outreach services. A holistic approach to tackling the needs of young people in partnership with other service providers is key to the success of this project.

2.3.15. We note that there is currently a lot of good work being undertaken in rural areas to tackle homelessness, including the development of services and facilities for rough sleepers using the £4 million that 11 rural local authorities have received from the Rough Sleepers Initiative. We also note that the Homelessness Task Force’s final report, due towards the end of this year, will include recommendations on addressing rural homelessness.

2.3.16. We urge the Scottish Executive, local authorities and housing associations to continue to work together at both the national level, through the work of the Homelessness Taskforce, and the local level, under the auspices of community planning to identify innovative housing solutions for those in greatest need in rural areas.
**Recommendations**

*R2.3.1* We endorse the recommendations contained in the recent report of the *Rural Partnership for Change* and recommend that the *Scottish Executive* commission further research on RTB and subsequent re-sales at an early date.

*R2.3.2* Local authorities and housing associations should develop policies to ensure, as far as possible, that disadvantaged and equality groups are allocated housing which suits their needs and enables reasonable access to essential services and employment.

*R2.3.3* We recommend that the *Scottish Executive* and *Scottish Homes* should consider, when developing national resource allocation methodologies for housing investment, the level of dedicated accommodation for homeless households and the capacity of a local authority to respond to homelessness.

**2.4 Health**

2.4.1. There is perhaps a perception that rural residents are healthier than many of their urban counterparts. However, we discovered that the health of the rural resident is affected by a range of challenges, dependent on locality - social and geographical isolation, high unemployment, out-migration of the young and an ageing population.

2.4.2. We examined the available data and noted that, for most health conditions and causes of ill health (such as smoking), trends appear to be determined by social class, age, gender, ethnicity, rather than whether a person lives in an urban or rural area. Therefore, there was no significant difference in the incidence of health conditions between rural and urban areas. For example, the incidence of Coronary Heart Disease is similar across all regions of Scotland\(^{10}\). Although there are presently no significant health inequalities between rural and urban areas, we believe that it is important for NHS Boards and other local partners to work together to develop a health strategy, which enables health issues to be tackled effectively in their rural areas. The Executive document *Our National Health, a plan for action, a plan for change*\(^{11}\) supports this approach. The role of NHS Boards as public health organisations is important in addressing the health inequality and social justice agenda in rural areas. We feel that this will ensure that health messages and health promotion activities reach all rural residents, so that the health of rural communities continues to improve on a par with national levels.

2.4.3 We welcome the Executive’s recognition of the additional costs of service delivery in remote and rural areas. We are pleased that the formula under which NHS Scotland receives its funding now takes full account of this factor and that this has been reflected in recent increases in NHS Boards’ allocations.

2.4.4. However, there are particular features surrounding health issues in rural areas which we feel are worth highlighting here.


\(^{11}\) *Our National Health, a plan for action, a plan for change*, Scottish Executive, December 2000.
2.4.5. **Alcohol.** We heard anecdotal evidence that there are high levels of alcohol consumption amongst males in some of the most isolated areas of rural Scotland, and that such consumption is culturally acceptable, or even encouraged. We heard a theory that the available statistics may not pick this problem up because of the tendency towards abstinence amongst other sectors of the community, which may skew the figures, although we are unable to substantiate this. Evidence suggests that families and neighbours in rural areas are more likely to support someone with alcohol dependency and will refuse professional help to avoid the stigma attached to alcohol misuse within communities. The trend toward increased alcohol consumption amongst younger females, as part of a wider cultural trend, is felt by many to be occurring in rural areas as much as in urban areas.

2.4.6. **Drugs.** One drugs project that we visited described rural drug use as being more "chaotic". Clients do not always have access to their drug of choice and they, therefore, take what is available. This may result in a higher risk of moving onto harder drugs as people are more likely to experiment with more dangerous drugs. In addition, a culture of heavy drinking in some rural areas can lead to a mixing of drugs with alcohol.

2.4.7. We discovered that drug misusers often find it difficult to access treatment, especially detoxification programmes. Funding levels were mentioned as a crucial issue by the rural drugs projects we visited. It was felt that failure to attract sufficient funding could be partly attributed to hostility within the community towards drug misusers and, conversely, to a denial that a drugs problem could exist in a rural area.

The SUN project in Kelloholm – an ex-mining community in Dumfries and Galloway - is funded by the New Futures Fund and is run in partnership with Dumfries and Galloway Council on Alcohol, Nithsdale Council for Voluntary Service, NCH Family Project and the Employment Service. The project addresses substance misuse, which includes alcohol, legal over-the-counter drugs and illegal drugs. It aims are to reduce substance misuse and associated behaviours; increase clients’ health and the opportunity for them to acquire new skills through education and training; and increase awareness, and the expectations of the community, to help create a safer, happier community. Substance misusers are highly visible in this small community, which can make it very difficult for them to redeem themselves. The main strength of this project is that it is working with substance misusers, helping them to tackle their problems and widen their opportunities; and with the wider local community to reduce hostility towards substance misusers by increasing awareness and understanding.

2.4.8. We welcome the funding of £100 million that the Scottish Executive has made available over the next three years to tackle drug misuse. We understand that some of this funding will be targeted at improving the availability of convenient local services for drug misusers. We urge Drug Action Teams to work closely with rural communities, NHS Boards, local authorities, local drugs projects, GPs and pharmacists to take forward the planning of confidential and accessible services to drug misusers in all rural communities, providing outreach services where necessary.

**Mental Health**

2.4.9 Throughout our work, we heard that physical isolation from social networks and support services, combined with an exaggerated culture of self-reliance, is thought to
contribute to stress, anxiety and depression. Groups thought to be particularly affected are men, who are often not used to expressing emotional needs, lone parents, older people and women from minority ethnic backgrounds. Stress, anxiety and depression are often not recognised by individuals as problems that require treatment and practical support and, as with alcohol abuse and domestic violence, there is a stigma associated with mental illness.

2.4.10. Again, visibility was a major issue for those suffering mental health problems. We heard that many people try to protect sufferers within their family by hiding their illness, refusing to access support services to avoid the whole community finding out. As in urban areas, the stigma associated with mental illness is still notable and in rural areas the reputation can stay long after the illness has been treated. For this reason it is imperative that mental health services are offered in a way that maximises confidentiality.

2.4.11. There are particular difficulties in rural areas when detention is required under mental health legislation. Gaining access to the necessary and appropriate services (health, social work, legal, etc) in a rural or island area can be difficult within the relatively short timescales imposed by the legislation for both emergency and long term detentions. The Millan Committee, which was established in February 1999 by the UK Government to undertake a comprehensive review of the Mental Health (Scotland) Act 1984, touched upon this issue and has made a series of recommendations. The rural aspect of delivery should be taken into account in the new mental health legislation.

Sexual Health

2.4.12. We found that sexual health issues are sometimes approached in a more conservative way in rural areas, often due to the influence of religion. GPs can opt out of providing health services that conflict with their moral or religious beliefs, instead referring patients to another GP. However, it is often not practical to refer patients to an alternative GP in isolated rural areas. For example, we found that in one isolated rural area unmarried women cannot access prescribed contraception. This leaves patients with a lack of choice and referring patients to a GP outwith the locality can be extremely difficult because of distance and cost. We suspect that there may also be issues for people from some minority ethnic groups in rural areas in relation to accessing sexual health services (and perhaps more general health services). For example, cultural issues surrounding the gender of doctor may be compounded in rural areas by a lack of choice of GP and language barriers may be more problematic. Again, we suggest that health issues for equality groups are explored through a wider study on the experiences of equality groups in rural Scotland.

In Moray, we visited the Teenage Parents project hosted by the National Children’s Home, and the Health Development Worker, hosted by Health Promotions. Both projects, which are funded by the Social Inclusion Partnership, Moray Youthstart, aim to provide health and social work outreach services to families in rural areas who are not being reached by mainstream services. To break the cycle of teenage pregnancy the projects encouraged young people to see there are life choices and to build their self-esteem. Growing the local economy was thought to be crucial in the provision of choice. Strategic planning and co-operation between local agencies, projects and initiatives were cited as key factors in the success of this project.

2.4.13. Visibility when accessing sexual health services is problematic. Within a small, rural community it is likely that the GP or chemist will know the patient and their relatives. This
can be very embarrassing for those who wish to access treatment for sexual diseases and causes a particular problem for young people who want to access contraception. The fact that the level of teenage pregnancy in rural areas is generally lower than that in urban areas may be attributable to social control exerted by traditional attitudes. However, for teenagers who do fall pregnant, it is possible that these attitudes, coupled with their visibility within a small community, may contribute to their exclusion.

**Access to pharmaceutical services**

2.4.14. While some rural communities have community pharmacy provision or GP collection arrangements for medication, many others do not. In some communities, there is no local pharmacy or GP. The trend away from GP house calls is also something that further disadvantages people in rural areas by making it harder for them to access primary care. Residents of such communities may have to travel to the nearest settlement to access GP services or prescription medicine. This can be particularly problematic for certain groups of people – notably older people, those with mobility problems and those who need to access prescriptions on a regular, sometimes daily, basis, but do not have access to affordable transport. For example, one project we visited told us that heroin users living outwith the main island settlement (this is where the majority of available social housing was located), can face difficulties in accessing their daily methadone prescription, which must be taken in the chemists. They estimated that daily travelling costs for one of their clients amounts to around £4 or £28 a week. It is impossible to meet these costs while living on benefits.

**Diet**

2.4.15. There is perhaps a conception that rural communities have ready access to healthy food. We found that, especially in the more remote and isolated areas, this is not the case. High transport costs can make fresh fruit and vegetables expensive and often of poor quality. Accessing healthy food may also be difficult, as rural shops can be small and isolated. In addition, help and advice on healthy eating options can also be more difficult to access.

2.4.16. The Scottish Diet Action Plan, ‘Eating for Health’ provides a framework for improving diet across Scotland and outlines key players and dietary targets to encourage healthy diets. We understand that a National Diet Action Co-ordinator has been appointed to support the implementation of the Plan’s recommendations and will, amongst other things, focus on action to encourage retailers to realise their role implementing the Plan’s recommendations. This is of direct relevance to rural areas, where work will address issues of accessibility and affordability. In addition, the Scottish Community Diet Project was developed by the Scottish Consumer Council and the Health Education Board for Scotland (HEBS) to work with low income groups in urban and rural areas. Of particular value is the Project’s grant scheme to encourage the development of Community Food Initiatives.

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**Skye Food and Learning Alliance**

Education, business and health all joined forces last year in north west Scotland to form the Skye Food and Learning Alliance with the aim of raising awareness of local produce and overcoming the barriers to a healthy diet. A key tool for the alliance is their popular mobile demonstration kitchen. The kitchen is in particular demand from communities with few local facilities and limited public transport.
Physical Activity

2.4.17. Physical activity covers a wide range of issues including active living, for example gardening, walking and cycling to work, physical recreation and sport. There is no evidence that overall participation rates are lower in rural areas. However, it may be more difficult to access sports and leisure indoor facilities, and the costs of accessing such facilities (transport and entry costs) may be prohibitively high. This may limit the physical activity choices of those who live in rural locations. The provision of sports facilities in rural areas should be considered within the context of the recommendations made by the SNRP on multi-purpose halls, in the report, Services in Rural Scotland. We understand that the Executive has established a Physical Activity Task Force (PATF). It would be useful if this group included a consideration of rural issues within their work.

Remote and Rural Areas Resource Initiative

2.4.18. We note that the Scottish Executive established the Remote and Rural Areas Resource Initiative (RARARI) to develop healthcare services and support for professional staff in remote and rural parts of Scotland. It has identified key issues in the delivery of healthcare in remote and rural areas, which echo many of the findings of our own investigations. RARARI is now taking forward work on access to services; core service models; recruitment and retention of staff; managed clinical networks to facilitate cross boundary working between clinicians in different NHS Boards; education and training needs of medical staff; and professional isolation. RARARI has funded a number of projects aimed at tackling these issues. Its Steering Committee recently decided to prioritise bids addressing the rural aspects of the national clinical priorities (cancer, heart disease/stroke and mental health) and to other priorities for development, such as maternity and diabetes services. We welcome this approach and are pleased that the Scottish Health Plan Our National Health: a plan for action, a plan for change sets a target for NHS Boards in rural areas to draw up plans for rolling out successful RARARI projects in their areas. More generally, networking arrangements for local health professionals, RARARI and NHS Boards should be maintained and strengthened to ensure that local and national rural priorities are identified and addressed.

Recommendations

R2.4.1 We recommend that, in line with the principles set out in the Scottish Health Plan ‘Our National Health: a plan for action, a plan for change’\(^\text{13}\), rural health professionals, RARARI and NHS Boards should build on and strengthen existing networking arrangements to enable them to work with rural communities to take forward work on developing a strategy to address local and national rural health priorities. This should include:

- the identification of the factors that affect the health of individuals, population groups and communities in rural areas; and
- the development of a strategy, to be led and implemented by the NHS Boards, to explicitly address the reduction of health inequalities in rural areas.

\(^{12}\) Ibid
\(^{13}\) Ibid
R2.4.2 The Health Education Board (Scotland) and NHS Boards should ensure that health messages and health promotion activities are co-ordinated and targeted to achieve maximum penetration in rural areas.

R2.4.3 We recommend that NHS Boards and local authorities should consider, under the auspices of community planning, how to ensure that disadvantaged groups in rural areas can access health and social care services by subsidising or providing transport to services or outreach services. We recommend that the following specific issues are considered:

- provision of pharmaceutical services to disadvantaged groups in rural communities;
- provision of patient transport for poor and socially excluded rural dwellers, in conjunction with the Scottish Ambulance Service (also see R2.1.3); and
- funding for specialist healthcare and social work services, such as projects dealing with drug misuse and mental health.

R2.4.4 Drug Action Teams and Alcohol Misuse Co-ordinating Committees should work closely with rural communities, NHS boards, local authorities, local drugs and alcohol projects, GPs and pharmacists to take forward the planning of confidential and accessible services for substance misusers in all rural communities, providing outreach services where necessary. In addition, the Scottish Executive’s proposed national plan for action on alcohol misuse should take account of the needs of rural communities.

R2.4.5 NHS Scotland and NHS Boards should consider how to ensure that people in rural areas can access contraception when their own GPs will not prescribe on moral grounds.

R2.4.6 Highlands and Islands Enterprise and Scottish Enterprise in their business support role, should work closely with the National Diet Action Co-ordinator, NHS Boards, HEBS and the Scottish Consumer Council, under the auspices of the Scottish Community Diet Project, to examine issues surrounding food availability and affordability in rural areas and roll out good practice from the rural projects funded through the Community Food Initiative.

R2.4.7 We recommend that the Physical Activity Task Force considers the extent to which rural issues affect physical activity and that its strategy for improving participation rates takes into account the specific circumstances of rural communities.

2.5 Joint working

2.5.1. The projects we visited emphasised that the ability to address single issues is severely limited in rural areas and some services can only be accessed in large urban centres. The unit cost of delivery and lack of availability of qualified staff in many rural areas are seen as the main factors responsible for this.

2.5.2. We suggest that one way to address the unit cost issue is for rural bodies to adopt joined-up working practices, working in partnership with other local public agencies, the private sector and the voluntary sector. In the course of our visits, we saw some examples of how this is already happening in some rural communities. This ensures that there is no duplication of effort by local public agencies and voluntary bodies, and can lead to more efficient use of resources. The ‘one-stop-shop’ type arrangement, where a range of services
are delivered from one building, can reduce the costs incurred by individuals and service providers within the community. We support the recommendations on partnership working in the Scottish National Rural Partnership’s report, Services in Rural Scotland. We think that the recommendation which asked the Executive to direct its agencies to participate in partnership working and set targets specific to service delivery in rural areas to encourage partnership working should also be applied statutory provision, such as health, social work and benefits advice services.

2.5.3. In the absence of mainstream services in many rural areas, we consider voluntary sector provision to be crucial to the continued wellbeing of many rural residents. The voluntary sector in rural areas delivers many services that are delivered centrally by statutory bodies in larger communities, where lower unit cost makes provision more feasible. We feel that it is important for local and national statutory providers to recognise the role of the voluntary sector in the provision of services in rural areas and urge them to support local voluntary projects with both advice and funding, where they provide a service that is complementary or additional to statutory provision.

2.5.4. In some of the rural areas we visited, multi-skilled workers are employed to deliver multiple agency services to rural residents. However, we understand that, at present, the terms and conditions for such workers are sometimes far from ideal and they are often paid different rates for the different roles they fulfil. We believe that there is great scope for multi-skilled workers in rural areas, especially to address issues of poverty and social exclusion. There are obvious advantages to this approach in rural areas: a holistic service for those suffering multiple deprivation; reduced unit cost of delivery for providers; and a reduction in visibility for those accessing outreach services as no-one in the community would know which service they were accessing. We think there would be considerable benefit in replacing the ‘silo’ approach to pay and conditions, and training for such workers, with a more joined–up approach. This would serve to make such posts more attractive to those with the ability to undertake such employment.

Recommendations

**R2.5.1** We recommend that statutory, non-statutory and voluntary bodies should work together with communities, under the auspices of community planning, to develop a co-ordinated approach to the delivery of services, either locally or by facilitating attendance at a central location, for disadvantaged people in rural areas. Where these arrangements already exist, service delivery should be reviewed on a regular basis, to ensure that the needs of disadvantaged people in the community continue to be met.

**R2.5.2** We recommend that local authorities, education and training providers, the Benefits Agency, the Employment Service and NHS Boards should work together under the auspices of community planning to consider:

- how to offer support to voluntary bodies which are already providing multiple services to excluded groups and communities in rural areas;
- what scope there is for increasing the number of workers delivering multiple services; and
- how the terms and conditions, and training for multi-skilled workers delivering multiple services can be rationalised to make such posts more attractive.
3. LIFE CYCLE STAGES

In Section A, we highlighted a number of overarching issues that impact upon poverty and social exclusion across rural Scotland. As we mentioned at the beginning of this report, we wanted to consider poverty and social exclusion from the point of view of how it affects people throughout their lives. While these overarching issues affect people differently at different stages in their lives, in this section we look at each stage of the life cycle, identify the key factors contributing to poverty and social exclusion for the individuals concerned, and suggest how these might be overcome.

3.1 Children

‘A Scotland in which every child matters, where every child, regardless of their family background, has the best possible start in life.’

3.1.1. It is vital that children in rural communities are given the best start possible – that they attain the basic education and life skills to enable them to develop; that they grow up in a safe environment, free from stress; and that they are removed from the cycle of deprivation. We found that there is an overlap between the issues affecting children, young people and families. However, there are poverty and social exclusion issues that specifically affect children in rural communities.

Pre-school provision

3.1.2. So far, we have talked about pre-school education provision as a means of childcare, which, of course, can alleviate child poverty by enabling parents to gain employment. However, the main purpose of pre-school provision is to give all children a good start in life so that they are, as far as possible, on an equal footing when they begin school. We welcome the Executive’s commitment to provide free pre-school provision to all three and four year olds, and the additional funding made available to rural areas to take account of the extra cost of delivery.

3.1.3. Current figures estimate that take-up of provision in rural areas is so far equal to that in urban areas (4 year olds - 97% Scotland, 98% rural local authorities; 3 year olds - 68% Scotland, 70% rural local authorities). However, given that this data is based on local authority areas, it may not be giving an accurate picture of the situation in all rural areas in Scotland.

3.1.4. While the available data suggests that participation rates for rural areas are high, we have concerns about the definition of access to pre-school provision in rural areas. On one visit, we heard about a parent who stayed overnight with relatives once a week so that their children could access pre-school provision one day a week. It is possible that this phenomenon, although perhaps not quite as severe, is more widespread within rural areas.

3.1.5. Pre-school providers referred to ‘diseconomies of scale’ in rural areas. They cited administrative burdens and the requirement to meet Her Majesty’s Inspector of School’s standards as being the main barriers to the provision of a sustainable pre-school service. We welcome the support that local authorities and other umbrella bodies provide in this regard.

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for pre-school providers and urge them to offer additional support to small-scale rural providers.

Education

3.1.6. The provision of education is crucial in helping children to overcome the problems which they face as a result of poverty and social exclusion in both rural and urban areas. We are aware that there are particular issues and challenges associated with the provision of education in rural communities, not least the high unit cost of delivery, small classes requiring mixed-age teaching, and the difficulties of attracting and retaining staff. Despite these difficulties, it is widely believed that, overall, educational attainment in rural areas is as good as, or better than, that in urban areas.

“There's jobs but no career path. One of the schools in this area had four Headteachers within twelve months!”

Teacher, Argyll & Bute

3.1.7. Mainstream education is usually provided in, or within a short commuting journey from rural communities, although there are some very isolated areas where children have to board. We identified two issues that may arise in connection to education in rural areas. It can be difficult to provide extra-curricular activities, in particular sports activities and team sports because of the time and cost involved in travelling to sports facilities and low number of pupils. We encourage the practice that is already adopted by many small rural schools, which come together for such activities. The delivery of special needs education locally, as with other single issue services, is not always possible due to the high unit cost of delivery. Therefore, many rural children who have to access special needs provision have to board during the week. We urge special needs providers to ensure that rural children, who live away from the family home during the week, live in as homely an environment as possible and have a good level of contact with family support networks. This could be done by using existing video-conferencing facilities belonging to local authorities, for example.

Recommendations

R3.1.1 The Scottish Executive should measure access to free pre-school provision for 3 and 4 year olds, once a reasonable model of access has been developed (see R4.2 in Section B).

R3.1.2 Local authorities and rural Childcare Partnerships should commission a study on access to pre-school care within their local areas. This should include or take account of:

- consultation with rural communities to determine community demand for various methods of delivery – for example centralised or outreach pre-school services;
- a feasibility study into the use of school transport to access centralised pre-school provision within the area; and
- good practice within the local authority area, considering how such information can be disseminated on an annual basis both locally and nationally.

R3.1.3 Local authorities and pre-school umbrella bodies, such as the Scottish Pre-school Play Association, should ensure that small-scale pre-school providers, who are essential to the accessible provision of pre-school care within a rural community, are adequately supported as regards meeting HMI quality standards and administrative requirements.
3.2 Young people

‘A Scotland in which every young person has the opportunities, skills and support to make a successful transition to working life and active citizenship.’

3.2.1. For the purposes of our investigations, we have considered young people to be those of secondary school age and those in the 16-20 age group. Young people are at a crucial point in their lives. They are completing their education and deciding what to do with their future; they are finding their expression as adults and building social skills; and, often, they are questioning perceptions and authority. It is also a time when there is real danger of setting a pattern of exclusion. A combination of low educational attainment, susceptibility to stray into socially excluding behaviour, low income, a lack of transport and access to housing and health, financial and leisure services can all conspire to exclude young people. It is important to enable young people in rural communities to fulfil their potential, so that they gain the necessary qualifications and skills needed to allow them to move on to further and higher education, training or employment.

3.2.2. We welcome the Executive’s recognition, in “Rural Scotland: A New Approach”, that providing opportunities for young people is crucial to ensure that they have choices in life, and don’t have to leave their rural communities to get on.

Visibility

3.2.3. It can be difficult for young people to act anonymously in rural communities. Young people with problems of violence, crime, substance misuse, or a disadvantaged background are often highly visible in communities and encounter stigmatisation. Even those young people who are well behaved may be labelled as ‘threatening’ because they ‘hang around the streets’. In addition, vulnerable young people are rendered highly visible by the naming and shaming of offenders in the local press. While we understand that this may act as a deterrent in many cases, it can also serve to socially exclude young people who already face significant problems within their lives or those who lapse for a short time during their adolescent years.

3.2.4. Such visibility can restrict employment opportunities and we heard that young people with a poor reputation in the community sometimes encounter negative attitudes from staff when accessing services. Socially excluded young people often lack confidence and self-esteem, and can be reluctant to access services provided by ‘the system’.

The Moray Youth Action project supports a number of services such as the 15+ “moving on” project, which seeks to enhance support to young people at risk of school exclusion across Moray. It seeks to build and maintain a mentoring type relationship and bridge the gap between the end of compulsory education and whatever comes next for the young people involved. One of the key benefits of this project is to offer experiential learning opportunities to young people in trouble. Young people are offered close support in learning skills, in getting and holding jobs, and in acquiring and sustaining tenancies in rural areas. Going out into rural areas to meet the young people, and inform them of what support could be offered and helping young people build relationships and be confident in these relationships were considered key factors in the success of the project.

15 Ibid.
3.2.5. We also found that, young people with highly visible problems (violent behaviour, substance misuse) may receive treatment sooner than those who attempt to hide problems because they feel that they will become stigmatised within the community. Abused young people, for example, may find it even more difficult to address their problem in a community where everyone knows them and their abuser.

Services

3.2.6. We noted that the genuine concern for young people was often coupled with a lack of awareness of their needs, or a lack of suitable services. We heard that many young people – usually the more excluded – were not attracted to sports and other organised leisure facilities for young people. We believe it is important to provide services in an informal manner and to create places where young people can meet and gain access to a range of services. A co-ordinated approach to service delivery can encourage young people off the streets and tackle the visibility issues linked to accessing services.

A café for young people in Lerwick provides a variety of services ranging from careers advice to internet provision. Because it is a multi-purpose facility, it can provide discreet advice services and the children’s rights service has also been contracted out to the café. Key factors in its success are its location – in the centre of Lerwick; the informal approach of staff; opening hours covering lunch times and evenings; use of computers/internet for a minimal fee; a range of information provision; and the fact that youngsters could come in off the street and have a coffee. The facility attracts young people who are not 'joiners' – those who lack confidence, are excluded from school or on the fringe of anti-social and criminal behaviour.

3.2.7. While centralised services work in certain circumstances, the project workers we spoke to believe that it is still essential to undertake outreach work to identify excluded youngsters who cannot or would not access central services, either because they are unable to afford to access transport, or they are unwilling to access the service. We support the recommendations within the Scottish National Rural Partnership’s report, Services in Rural Scotland, on addressing the needs of young people.

Education

3.2.8. Although educational attainment is thought to be higher in rural areas, some young people in rural communities are ‘at risk’ of entering into a downward spiral of low paid, insecure work, or even dropping out completely. The lack of access to a range of opportunities for further education and employment may create particular barriers for young people deemed to be ‘at risk’. As with other single issues, the capacity of rural areas to cope with behavioural problems or exclusions from school is more limited than in urban areas, where there may be a wider choice of schools or specialist providers who deal with young people who are experiencing a range of difficulties.

3.2.9. We note the existence of projects like the Forres Challenge project, funded by Moray Youthstart Social Inclusion Partnership which aims to help young people at risk of exclusion from school or having difficulty using mainstream employment training opportunities, and urge that good practice from this and other similar projects across rural Scotland be disseminated widely.
**Training, employment and transport**

3.2.10. Accessing training and employment opportunities can be particularly difficult for young people, who may not be old enough to drive, or, even if they are, may not be able to afford driving lessons or private transport, and thus have to rely on public transport to access such opportunities. Setting aside the time involved in travelling, the cost of public transport can be punitive for those who survive on a training scheme wage. It would be helpful if employers and training providers worked with transport providers to offer schemes that provided discounted transport, or an advance on salary to pay for transport to help young people in this position. Where possible, accessing training remotely using ICT should be considered. This may also increase the choice of provider.

**Housing**

3.2.11. We have already outlined the key issues surrounding the provision of housing in rural areas. Most local authorities and housing associations prioritise social housing for families, which may limit the availability of housing for young, single people and young couples. While the processes that lead to homelessness are similar in rural and urban areas, the capacity to house the homeless and deal with a range of problems is severely limited in rural areas. Many young people are unable to secure hostel accommodation and we suspect that they stay with friends or leave for urban areas. This problem is particularly pertinent for young people leaving care, who may not have family support networks to fall back on.

**Recommendations**

**R3.2.1** We recommend that schools, employers, local partnerships and voluntary projects should work together and share good practice on bringing excluded young people back into the community and to reduce the negative image that young people sometimes have within the community.

**R3.2.2** Local authorities and transport operators should consider setting up concessionary public transport schemes for young people travelling to employment, until they receive their first wage.

**R3.2.3** The Scottish Executive should ask local authorities to report on the housing situation of young people leaving care.

**3.3 Families**

‘A Scotland in which every family can support itself - with work for those who can and security for those who can’t’

3.3.1. In considering the social exclusion faced by families in rural areas, we extended the definition to include working age people, so as not to overlook those in that age group who might not fit into the ‘families’ definition. We know that families’ experience of poverty and social exclusion can be magnified in rural areas by lack of access to services; education, training and employment opportunities; and affordable transport and housing. Visibility also affects families in rural areas and it is easy for a whole family to become stigmatised, either

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16 Ibid.
because they face a specific problem or because the family has a bad reputation within the community.

Girvan hosts a satellite of Ayr College of Further Education. By working closely with the Social Inclusion Partnership they were able to identify groups who could make use of a more locally based facility and identified in particular people with physical or learning disabilities, students who require childcare facilities, and some types of school leavers, revealing a demand for further education services which its Ayr campus could not attract. They used a grant from the European Regional Development Fund to renovate ex-Council buildings in Girvan. The college shares these facilities with two other initiatives of South Ayrshire Council, the South Carrick Open Opportunity Project and the Ayr Locality Economic Regeneration Team. The importance of having an asset base such as the unused ex Council building was viewed as an essential aspect of the Girvan project.

**Housing**

3.3.2. For families, the security and comfort of a permanent residence is particularly important in terms of stability and putting down roots in a community. A lack of suitable accommodation impacts on family life in a variety of ways such as disrupting children’s education, losing out on employment or training opportunities or impacting on health.

3.3.3. The availability and affordability of housing relates directly to poverty and social exclusion. Those who cannot obtain a permanent home will find this impacts across a range of family activities. Many of the issues are covered in the section on housing earlier in this report. We felt it was of particular significance to families that social housing in rural areas, where available, may not be provided in locations which are easily accessible. This is a severe disadvantage to those already on low incomes who have to travel to access services (such as pre-school provision and childcare), education, training and employment opportunities. We encourage housing providers to consider this problem when building new social housing; and to play an active part in any discussion on local service provision.

**Support Services**

3.3.4. We came across situations where excluded families in rural areas are facing difficulties in accessing services because of a shortage of qualified staff. This applies to those who require home care and related support, such as some disabled people and their families; disadvantaged families who require specialist social work services; and ethnic minorities who, because of low numbers, are sometimes not catered for in rural areas. We believe that the quality of life of many families depends upon access to such services and we strongly support the formation of strategies and dissemination of good practice to attract qualified staff to ensure continued access to these services.

3.3.5. Childcare is an important issue for families. We have already described earlier in this section how a lack of childcare can act as a barrier to gaining or sustaining education, training and employment opportunities.

**Education, Employment and Training**

3.3.6. We recognise that regular employment is one of the key factors in removing people from poverty. Reducing unemployment, reducing the number of people on low incomes and
increasing employment are key social justice milestones for the families and working age life cycle stage. There are issues over collecting data in relation to these milestones for rural areas, which will be picked up later in the report. However, the evidence points to low skill and low wage employment opportunities. With a downturn in the traditional industries the economic development agencies must look at supporting new opportunities.

3.3.7. The opportunity to access education and training to update skills and learn new skills is an important stepping stone to gaining employment. It is essential that lifelong learning strategies consider rural provision if those living in rural areas are to be lifted out of poverty. Distance learning is an effective way of reaching those who are unable to access a college or a university. The development of satellite institutions of larger educational establishments, such as the Crichton Campus in Dumfries, or the provision of mobile services is also instrumental in extending choice in rural areas. We heard a strong message that innovative approaches are required to open up lifelong learning opportunities.

3.3.8. We recognise that all rural employers must have an adequate skills base to draw on. This can also be important in attracting inward investment to rural areas. The provision of lifelong learning is, therefore, essential to attracting employers and ensuring that rural dwellers are able to access a good range of employment opportunities and to progress within the workplace. There are many innovative ways of delivering training, many of which are described in this report. We welcome the establishment of learndirect scotland, which aims to help people enhance their skills and employability, and Scottish companies improve their competitiveness by embracing lifelong learning. We are also pleased to note that the Executive is supporting two rural pilot schemes in Lochaber and the Borders, which assist eligible people who wish to access lifelong learning opportunities with travel expenses and childcare costs. We understand that the lessons from these pilots will be evaluated later this year as part of the review of Individual Learning Accounts.

In South Ayrshire an ICT training bus travels to the remote villages to offer courses in basic computer skills in conjunction with the Girvan satellite of Ayr College. In Colmonnell the bus parks outside the community centre where a free crèche service is provided. The bus was an important first step in enabling local people to access training and in building confidence to access further training.

3.3.9. We believe that imaginative and holistic approaches are imperative to finding sustainable solutions in rural areas. One project that we visited was putting together proposals to offer training, employment and small-scale economic development opportunities from one site. These activities are interdependent, with the produce of the trainees (horticulture, catering and crafts) being sold to support the upkeep of the premises and workshops being provided free of charge to local craftspeople on condition that they dedicate some of their time to teaching the trainees. This particular project has a focus on getting local unemployed or disabled people and those who experience learning difficulties, into work.
Recommendations

R3.3.1 Community planning partners should consider with Jobcentre Plus and Pension Service, education and training providers and the voluntary sector, innovative ways to identify (from the local community or elsewhere), train and retain qualified staff who provide essential services, often to disadvantaged groups within the local community. This might cover childcare, health and social care, and housing and benefits advice, and should include:

- an audit of existing good practice in identifying potential trainees locally and attracting/retaining qualified employees within remote and rural areas; and
- considering ways to publicise opportunities to potential trainees, especially those groups which are disadvantaged in the labour market, such as lone parents and ethnic minorities, outwith formal rural employment networks.

3.4 Older People

‘A Scotland in which every person beyond working age has a decent quality of life’

3.4.1 Older people across rural Scotland should have a decent quality of life in retirement. They should be financially secure and should be able to access advice and services, so that they can enjoy active, independent and healthy lives.

3.4.2 Poverty is one of the key barriers to social inclusion for many older people. Housing, transport, health and social care problems are all exacerbated by low incomes. We came across a culture of self-reliance amongst older people, which stigmatises reliance on benefits. However, we are not suggesting that all older people in rural areas are income poor, as many older people retire to such areas through choice and may be relatively affluent.

3.4.3 Generally, older people are affected by the same difficulties as other people living in rural areas. However, lack of mobility, inability to cope through increasing frailty, low incomes and increased social isolation affect older people particularly. Other issues around mobility and care services may affect the lives of older people in rural areas differently to their urban peers or younger rural neighbours. Coupled with these issues, is a lack of access to advice services and a lack of knowledge about help available.

The Better Government for Older People (BGOP) programme was set up in 1998 as part of the Modernising Government Agenda. 28 local authority pilot schemes were set up across the UK to address issues such as access to information; living independently; and healthy lifestyles. The report of the Scottish BGOP pilot schemes - in the Scottish Borders, South Lanarkshire and Stirling makes recommendations on combating age discrimination, engaging with older people, better decision-making, meeting older people’s needs and promoting a strategic and joined-up approach. This report is the first step in forming an overarching strategy for older people, using joined-up approaches and characterised by a listening approach – encouraging older people themselves to shape and influence the strategy. The report can be accessed on the Scottish Executive’s website at http://www.scotland.gov.uk/library3/society/bgop-00.asp

17 Ibid.
**Transport**

3.4.4. Our visits highlighted that the difficulties associated with transport in rural areas are particularly acute for older people. Car ownership can become difficult or impossible for older people, as lower incomes and, in many cases, physical frailty makes the upkeep and use of a car impractical. We found that older women have particularly low levels of car ownership and many are unable to drive.

3.4.5. As we have said, infrequent or unreliable public transport can cause significant problems for rural communities. For older people, this is often compounded by the physical difficulty of getting on and off unadapted buses, getting to and from a bus stop and even spending long periods of time travelling. This can result in older people becoming particularly isolated, simply because transport is inaccessible. We found that older people are the main client group of community transport schemes, which provide accessible transport, often collecting them at their house. The cost of transport can also be a particular barrier to older people, with some reporting that they cannot afford the cost of travelling even relatively short distances. Recommendations R2.1.1 and R2.1.5 of this report are particularly important in addressing the transport needs of older people in rural areas.

**Health**

3.4.6. The impact of isolation on health can be significant. For example, the difficulties of providing homecare services in remote rural areas can result in older people entering long term care, sometimes far away from their home areas. While primary health care is perceived as being of high quality in rural areas, there are more difficulties associated with older peoples’ need for secondary health care. Accessing hospital facilities can be difficult in terms of travelling, time and cost, a specific issue raised by older people. Again recommendation R2.1.3 of this report seeks to address the issue of patient transport.

**Mental Health**

3.4.7. Older people with dementia and other mental health problems face particular difficulties in rural areas. While they may receive support from neighbours and friends in the local community, services such as day care and intensive home support schemes are not so readily available. In addition, visits from Community Psychiatric Nurses are visible to others in the community and some older people wish to avoid the stigma. There can be a strong work ethic amongst the older generation, where idleness is frowned upon, increasing older people’s sense of isolation from their community, because they fear being regarded as a burden. Loss of independence and the visible nature of associated service provision can, therefore, be deeply distressing.

3.4.8. The loss, through death, of a partner, siblings or friends can increase social isolation and be detrimental to mental health. This can be intensified by isolation from family networks as sons and daughters often move away from rural areas to find work.

**Health and care services**

3.4.9. Health and social care needs of older people in rural areas may go unrecognised, sometimes through an unwillingness or inability to access help and support. As well as
physical isolation and barriers around accessing services, many older people are reluctant to admit that they can no longer cope with their house or lifestyle, and actively seek to hide their difficulties. While this is also the case in urban settings, isolated older people who are experiencing difficulties in coping can be less visible to the authorities in rural areas, and may consequently remain unsupported for longer. However, in contrast, those with neighbours close by may receive more help than their urban counterparts.

3.4.10. Socially, older people may face a number of barriers to inclusion which are less common in other sectors of society. We found that personal hygiene, for example, can be problematic for older people who are unable to use, or do not have adequate bathing facilities, or are unable to keep clothes and homes clean because of health problems. Inadequate access to home help services can worsen this problem, and these issues can contribute to a very personalised sense of exclusion, making older people more reluctant to interact with their community.

**Housing**

3.4.11. Housing in rural areas can also be a difficult issue for many older people. People at retirement may find themselves having to move from tied occupational housing, and struggling to find suitable, affordable alternatives within their home area. Lack of social housing (particularly adapted or sheltered housing), high private rents, below tolerable standard housing, and inefficient and costly heating systems can result in housing costs taking up a higher than average proportion of older people’s incomes in rural areas. Sometimes older people who own their homes cannot afford to pay for basic repairs and renovations.

**Income**

3.4.12. Older people often have a low household income. In rural areas, this can be compounded by difficulties in accessing benefits and income advice. We found that, culturally, even where advice is relatively accessible, there may be low uptake amongst older people, who often attach great stigma to reliance on benefits. Reluctance to claim can be heightened by the visibility and lack of anonymity often inherent in accessing services in rural areas. Older people seem to have lower expectations in terms of benefit related income than other sectors of society, although recently, financial issues have been raised at consultation events. We understand that the Department for Work and Pensions has undertaken research to assess why there is low take-up of income support and minimum income guarantee amongst pensioners, and to develop methods to encourage take up. The results of this work should be considered alongside the reports of the rural Better Government for Older People pilots in Scotland.

| The Welfare Benefits Team of the Scottish Borders Council’s Better Government for Older People project in the Borders have found two approaches very effective: the employment of home care support staff, who visit older people in their homes, taking them right through the process of completing forms and undertake follow-up enquiries; and bringing together groups of older people who can provide advice and support drawing on their own experiences. Peer group support also breaks down the feeling of stigma associated with benefit take-up. |
Recommendations

R3.4.1 The Scottish Executive and CoSLA should commission a study to build upon the information gathered in the Scottish Household Survey and evaluate good practice in providing services to older people in rural areas. This might be undertaken as a follow-up to the evaluation of the BGOP pilots and should make recommendations on the following:

- raising awareness amongst older people of available services and entitlements;
- provision of services, including health services, in ways that are sympathetic to the needs of older people in rural areas;
- reducing the stigma attached to claiming benefits;
- innovative ways of identifying older people in need and ensuring that they receive holistic service provision;
- questions which should be included in the Scottish Household Survey in future years; and
- existing good practice.

R3.4.2 Support, both in-kind, financial and advisory should be made available to support voluntary and charitable projects which deliver services to rural older people. In particular:

- The Scottish Executive should consider making “services for older people” a theme for a future round of the Rural Challenge Fund. Applicants should demonstrate that they have actively engaged with older people in developing such services.
- Local authorities, NHS Boards, the Department for Work and Pensions and the Inland Revenue should jointly consider ways in which they can support voluntary or charitable projects which are providing services to older people, and are complementary to their roles as statutory service providers.

3.5 Communities

‘A Scotland in which every person both contributes to, and benefits from, the community in which they live.’

3.5.1. While it is widely recognised that the scattered nature of rural communities means that social exclusion is unlikely to be found in the same highly concentrated clusters as in some urban areas, social exclusion can, nevertheless, have a significant impact on rural communities.

3.5.2. We found that, in looking at how rural communities are affected, the 3 key themes identified earlier – access, visibility and culture – play a major role. It is important to remember that there are also aspects of visibility and culture that are a positive force for communities. Visibility can lead to an early identification of problems, fostering mutual support and driving the community to seek local solutions. Culture can give the community a sense of common identity and help people to understand their community better. However,

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we found that, in some circumstances, these aspects can dictate against building strong communities and providing for those who are most disadvantaged.

**Community empowerment**

3.5.3. Building community confidence and empowering local communities to play a role in local development is key to tackling poverty and social exclusion. Community members, voluntary and community groups play a large part in service provision, and the development of activities which address exclusion. We found examples in rural communities of people uniting to tackle problems which were causing exclusion within the community. The community spirit which exists in many rural communities is a valuable resource which should be supported and built upon. Rural communities, like communities elsewhere, need to be empowered to help shape their own identity. In some rural settings, traditional urban-based approaches are often not viable and there is great benefit in communities and service providers working together to look for a different way of addressing local problems.

The Working for Communities pathfinder in the Dick’s Hill estate in Stranraer aims to empower the community, and individuals, to enhance their lives and well being. Specific objectives include developing effective communication, prioritising local ownership, considering options for changing ways in which services are delivered and establishing a strategic framework. The project enlists members of the community as paid community activists, which builds confidence, improves job prospects and fosters a sense of community ownership. It runs various projects, including a garden scheme, a litter amnesty, a crèche and childcare forum, and youth activities. It will also conduct a consultation exercise to gauge community transport requirements and has started up a community newspaper to spread awareness of its activities and provide an opportunity for activists to hone their computer literacy skills.

3.5.4. We were disappointed to find that national and local agencies do not always actively engage with community representatives, especially with excluded groups. Many rural communities still feel inhibited by top-down agendas, competitive bidding, pump priming and short term funding, which can serve to reduce community confidence and often deters people from becoming involved. Community planning will help to ensure that local groups and communities drive the local agenda, and we welcome the Executive’s commitment to legislate for community planning. For community planning to succeed, it is imperative for all sectors of the community to be involved in the process, including those from the most disadvantaged groups.

3.5.5. Community infrastructures can be fragile and the sustainability of local services often depends upon the dedication and enthusiasm of a few individuals or volunteers. This is especially true in rural areas, where the unit cost of delivery makes it impossible for central agencies to deliver some services. It is, therefore, essential that local agencies buy into this process and support local voluntary projects which help to alleviate poverty and social exclusion. It is in the interests of local agencies to work with community and voluntary groups, providing advice and funding and involving them in the planning of local services.
Ballantrae Rural Initiative for Community Care (BRICC) is a voluntary sector initiative in the village of Ballantrae, South Ayrshire. It provides care and support to the elderly, frail and disabled, and their carers, enabling them to remain in the comfort of their own homes for as long as possible. It offers home care from fully qualified staff, support and respite care, emergency support and routine domestic services to working or busy housewives. People can apply for help independently and the project also works in close liaison with GPs, District Nurses and the Social Work Department to identify those in need of their services. BRICC’s success can be attributed to three key things: individuals energising and motivating the rest of the community, backed by local service providers and elected representatives; the delivery of products that are wanted by the target group; and a regular income stream (the thrift shop plus partial cost recovery for services) and asset base (both the property which they had purchased or leased and the willingness and skills of the volunteers).

‘Double disadvantage’

3.5.6. We heard that there are some individuals within rural communities who may feel ‘doubly disadvantaged’. For example:

- those with health and mental health problems
- equality groups – gender, ethnic minorities, lesbian, gay, bisexual and transgender people, and disabled people;
- those who have stepped outside social boundaries in some way, such as substance misusers; and
- those who suffer sexual or domestic abuse.

3.5.7. Some people may belong to more than one of these groups and, from the evidence we have heard, are more likely to experience low incomes or exclusion from the community. These groups are as likely to be found in urban settings. However, the additional problems they face in rural areas can worsen their situation.

3.5.8. Mental health. We have already discussed in this report the problems facing those suffering mental health problems and their carers in rural areas. We urge those bodies involved with the delivery of mental health services to ensure that service delivery methods minimise visibility of treatment within the community; encourage carers to seek help; and promote the delivery of holistic support services.

3.5.9. Equality groups. We found it difficult to uncover information about the experience of minority ethnic groups in rural Scotland. Statistically, it is difficult to measure trends in rural Scotland and we heard that, because of low numbers, the minority ethnic needs are sometimes forgotten. The Commission for Racial Equality report, Needs Not Numbers, emphasised that the provision of services to minority ethnic groups in rural areas should be based around needs and not the size of the minority ethnic community. We also understand that isolation from services – for example, cultural and religious services - is often more pronounced for such groups. We encourage all local agencies to make information available in minority ethnic languages. However, we believe that further research is needed to fully comprehend the situation of minority ethnic groups in rural areas.

3.5.10. The information on lesbian, gay, bisexual and transgender (LGBT) people was even more limited. We were told during our visits that most LGBT people move away to an urban
area and those who choose to stay may often keep their sexuality a secret because of concern over the reaction of the local community. Again, it was suggested that LGBT people are particularly isolated from relevant services. Local delivery would have to be extremely sensitive to avoid visibility within the community. We think it would be useful to compile more information on this issue and suggest that research is commissioned.

3.5.11. There was more information available about the needs of disabled people. Issues of accessibility are paramount and we heard that disabled people, who may need to attend appointments at the hospital to receive treatment or therapy for their disability on a regular basis, often have to pay more in transport costs. Milestone 17 of the social justice milestones seeks to increase the proportion of people with learning disabilities able to live at home or in a ‘homely’ environment. We consider that a lack of support services and qualified care staff could pose a barrier to achieving this target in rural areas and suggest that recommendations R2.1.1 and R2.1.5 of this report are important factors in achieving equality for disabled people who experience mobility problems.

3.5.12. There may also be gender specific issues in rural areas. For example, a recent conference on rural women’s issues revealed a perception that gender roles in rural communities are more likely to be defined by tradition. It is thought that this may affect employment issues and that deviation from the norm is viewed with suspicion or, in some cases, hostility. On our visits we heard that alcohol consumption is particularly high amongst men living in remote areas of Scotland. Issues that were thought to impact on rural women include childcare and domestic abuse. We believe it would be useful to carry out, perhaps as part of national work, a study of rural domestic abuse, which tests the theories and recommendations contained in the East Fife Women’s Aid report (see below) to ascertain whether they can be more widely applied to rural Scotland.

The report, *Reaching Out: Women’s Aid in a Rural Area*[^20], which was published by East Fife Women’s Aid in 2000, gives an interesting account of the barriers faced by rural women, including minority ethnic women and disabled women, who suffer domestic abuse – this includes physical, emotional and mental, and sexual abuse – and possible solutions. The barriers identified relate to those issues identified in this report: access to services (lack of information, transport and housing, long police response times); visibility (difficulty of contacting or visiting service providers on a confidential basis); and culture (pressures to stay married, often for religious reasons). This report makes recommendations for the East Fife area, while acknowledging that these solutions may not be suitable for all areas in rural Scotland.

3.5.13. Substance misuse. Some of the issues surrounding drug and alcohol misuse in rural areas are addressed in the health section of this report. It is worth noting that, on some of our visits (two of which were to drugs projects) we received comments about the resistance of sections of the local community and some local councillors to providing support to projects which tackle drug misuse in particular. Local hostility to such projects was attributed to an opinion within the community that those who took drugs did not deserve to receive help.

3.5.14. Generally, the visibility of disadvantaged groups in the community means that service providers must consider how services are delivered so that these groups do not become

excluded from the services which can help them. This particularly applies to services where it is necessary to ensure that:

- people are able to understand the services which are available;
- the views of sections of the community does not prevent the provision of the service; and
- there is complete confidentiality and trust for those who may exclude themselves because of fear of an individual or community reaction.

**Recommendations**

**R3.5.1 Local and national agencies** should always consider rural poverty and exclusion issues when creating new policies. This is especially important for all agencies operating in a mixed urban/rural environment, where policy may traditionally have focused on the urban context.

**R3.5.2** We recommend that community capacity building in rural communities is encouraged by ensuring that:

- **community planning partnerships** in mixed rural/urban local authority areas have a specific forum for considering and addressing rural needs;
- **local partners** under the umbrella of the community planning partnership, provide resources and support to rural communities and voluntary organisations to target programmes/activities towards specific disadvantaged groups; and
- **rural communities** work together to promote the interests of all residents, including those who are excluded or disadvantaged.

**R3.5.3 The Scottish Executive** should work with the three main equality bodies, the Commission for Racial Equality, the Equal Opportunities Commission and the Disability Rights Commission and the Equality Network, to build upon existing research and experience in order to develop an understanding of the experiences of different equality groups in rural Scotland and to come up with measures to ensure their full participation and involvement in national and local policy development.
4. KEY ISSUES AND RECOMMENDATIONS

4.1 We were asked to examine the indicators set for the 29 Social Justice Milestones to ensure that they are appropriately developed for, and measurable in, rural areas. These milestones were set out in "Social Justice…a Scotland where everyone matters". Indicators are used to measure progress towards the milestones, with data sets being selected to provide information against each indicator.

4.2 In taking forward our consideration of these indicators, we adopted a three-pronged approach. We examined each milestone and considered:

- whether different circumstances in rural areas ruled out the use of certain indicators that would be acceptable to measure poverty and social exclusion issues in an urban context;
- whether data sources used were capable of giving a true measurement for rural areas of progress towards milestones; and
- whether there were any issues associated with poverty or social exclusion in rural communities which were not covered within the indicators.

This section sets out specific recommendations for action, divided into short, medium and longer term actions. Detailed information on each of the 29 milestones, the appropriateness of the indicator and dataset, and recommendations, are set out in the Table on pages 57-70.

In examining the appropriateness of the data source, we paid particular attention to whether the data is held with postcode information, in order that fine-grained definitions of rural and urban can be applied to the data.

Recommendations for Immediate Implementation

4.3. Our consultations have shown that there is some research, evidence and local information that points to rural differences in some features of social exclusion, and these have been set out in Section A. However, in other areas, knowledge and evidence is limited, and an initial breakdown of all the milestones into urban and rural will provide an indication of whether rural differences occur which require further exploration. In the short term, therefore, we recommend that all the 29 milestones are analysed to explore any potential differences between urban and rural areas. The use of proxy or disaggregated datasets should, in most cases, give a reasonable indication of the state of play in rural areas. In some cases rural areas will be better placed than urban areas, and in others perform less well, and such an analysis should provide information on where policy should focus on problem areas, be it rural or urban. Where this rural ‘benchmarking’ reveals no rural/urban differences, monitoring should be carried out on an occasional basis rather than annually.

4.4. This requires that a definition of rural is applied to the datasets. Whilst we recognise that the Ministerial Committee for Rural Development has agreed a core framework for defining rural areas for policy purposes, it will not be possible at present to measure all the 29 milestones using this definition due to the limitations of some of the existing datasets. For example, some data is only available at local authority level. We hope that the neighbourhood statistics initiative (discussed below) will improve local area data so that fine

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grained and agreed standard definitions of rural can be used in the future, such as the Scottish Household Survey definition.

**Recommendations**

*R4.1* The Scottish Executive should provide an urban/rural breakdown of all 29 milestones and their associated indicators, using available data sets to produce a comparative indication of the situation in rural Scotland.

**Medium Term Action**

4.5. The social justice milestones reflect issues that are important across Scotland. Our consultations have shown that, in some cases, they do not adequately reflect issues of importance in rural areas - specifically access to services and differences in the importance of elements of the cost of living between rural and urban areas – and these are discussed here. In addition, current data is not sufficient to measure the rural dimension of some of the milestones – the table at this end of this section sets out recommendations for each milestone, where problems exist with the data source, in terms of enhancing the dataset, developing new data and commissioning research. We discuss here, however, the lack of robust data on incomes to measure poverty in rural areas, given its central importance in the milestones and the fact that low income is often a primary cause of social exclusion.

*Access to services*

4.6. Both our consultations and the SNRP’s report, Services in Rural Scotland, have highlighted the importance of access to services in rural areas, and we endorse the SNRP’s recommendations. Lack of access to services has a significant impact on people’s lives, and, for those who are already disadvantaged, can exacerbate their experience of poverty and social exclusion. At present, the milestones do not adequately measure levels of service provision or any problems of access to services. We recognise that there is no agreed way of measuring access to services at present and, therefore, it would make sense to develop a robust methodology that can be integrated in the monitoring of the social justice milestones. We recommend that ways of measuring access to services are developed and monitored and that consideration be given to including indicators covering access to services in future social justice annual reports. We think that the Executive should develop two measures of access to services: firstly a model should be developed to measure both the availability and location of services (taking into account mobile and remote services and transport); and, secondly, a survey which measures patterns of usage and perceptions of service quality and availability amongst rural communities. Geographic Information Systems being developed by the Scottish Executive will be a useful tool in the mapping and analysis of access information.

4.7. We welcome the ongoing research commissioned by the Executive on ‘rural accessibility’, which is aiming to develop, and pilot accessibility indicators or alternative measurement techniques to examine the extent of transport derived rural social exclusion.

*Incomes and prices*

4.8. A further area that impacts on the experience of social exclusion in rural areas and is not currently measured in the milestones is affordability and the cost of living in rural areas.
Research has indicated that the price of some essential services and goods are higher in rural areas and, unless this is offset by lower costs elsewhere, real incomes and purchasing power will be lower.

4.9. At present the social justice milestones take account of housing costs in relation to income - the Households Below Average Income dataset from the Family Resources Survey uses two measures of income: Before Housing Costs (BHC) and After Housing Costs (AHC). The need for both measures arises from the variation in housing costs. Analysis and monitoring of both expenditure on all key areas such as housing, transport, food and the costs of living in rural areas is required to be able to fully understand the impact of low incomes and poverty in rural areas.

4.10. We welcome the joint initiative of the Scottish Executive, Highlands and Islands Enterprise and Scottish Enterprise to commission an extension of the Rural Scotland Price Survey to cover the whole of Scotland. This survey will provide valuable information on how prices differ between urban and rural areas, as well as rural and remote areas. Combined with this, a Rural Scotland Expenditure Survey has been commissioned which will provide a comparison with the Family Expenditure Survey.

4.11. Accurate evidence on incomes and poverty in a rural context has, in the past, been made difficult by the inappropriateness of datasets. In particular, the use of car ownership and benefit take-up are commonly used as indicators of income and wealth. Section A has already discussed why some rural dwellers may reluctant to take up benefit entitlement. It also highlighted the necessity of car ownership in rural areas and people on low incomes in rural areas are often more likely to own a car, at the expense of other necessities, than in urban areas. We note that the social justice milestones do not use car ownership or benefit take-up as a proxy for income, and instead use datasets that directly measure income (namely the Family Resources Survey and the British Household Panel Survey), and we welcome this. However, the limitations of the datasets on income reduce their effectiveness in measuring levels of income and poverty in rural Scotland. The sample sizes of both the Family Resources Survey and the British Household Panel Survey are too small to generate robust estimates of incomes in rural Scotland, and this is critical given the use of these datasets to measure income for the different life-cycle groups.

**Recommendations**

**R4.2** The Scottish Executive should develop a methodology for measuring and monitoring access to services in rural areas, including a methodology to measure perceptions of access.

**R4.3** We recommend that the Scottish Executive develops the results of the Rural Scotland Price Survey and Rural Scotland Expenditure Survey to model differences between rural and urban incomes, price levels and trends over time.

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22 In part this reflects variations in the quality of housing, but there are also significant cost variations that do not reflect quality variations. The growth in BHC income is likely to overstate improvements in the living standards of low-income groups, because it counts, as an income rises, higher Housing Benefit which merely offsets higher rents. Conversely income growth AHC will tend to understate improvements in living standards where higher housing costs reflect improved housing. Because of this each measure has imperfections as a guide to differences in, and changes in, living standards, but the two are complementary.
R4.4 We recommend that the Scottish Executive explores alternative data sources and uses them to measure progress in tackling poverty in rural areas in the medium-term, before results from the neighbourhood statistics initiative (see below) are available.

Longer Term Responses

4.12. We have already noted that, in some cases, existing data sources are inadequate to measure progress towards the 29 milestones in rural Scotland. A number of initiatives have recently been established that aim to improve small area data, but these will not deliver data to fill this gap until the longer term. In particular, the Scottish Neighbourhood Statistics initiative should provide a valuable source of information.

Neighbourhood Statistics

4.13. Scottish Neighbourhood Statistics, led by the Scottish Executive, is a major project which aims to develop a wide range of information (with a particular emphasis on social justice) at the smallest area level possible, and make this freely available to all in the form needed, subject to maintaining personal privacy. We understand that, in terms of social justice, the project will:

- ensure that there is better information on the extent of geographical differences in social exclusion;
- help to measure the degree of convergence between the poorest areas and the rest of the country; and
- improve the quality of information on minority groups suffering from inequalities

4.14. We welcome this recognition of the need for more local data, particularly if policies and programmes on social justice and neighbourhood regeneration are to be developed and delivered effectively, and if the needs of rural areas and minority groups are to be addressed. These small area data are essential to enable the proper measurement of rural poverty and social exclusion, and to overcome the limitations of existing data described above. Policy on rural areas will benefit not only through the improved capacity to take account of social exclusion, but also through providing a better information base for programmes and activities. This will allow better services to be planned and delivered in ways that are more sensitive to needs and opportunities. We welcome the commitment to gather more local area data. However, we wish the Executive to note that the term ‘Neighbourhood’ is generally inappropriate for rural areas and specifically for the consideration of poverty and social exclusion in rural areas, where the sparse and scattered nature of the rural population means that disadvantaged people may live amongst more affluent neighbours.

4.15. One of the main factors mentioned by organisations in our consultations, which limits their ability to share small area data, relates to problems associated with the lack of standardisation of data. In particular, differences in the geographical boundaries of organisations were frequently noted, leading to problems of data ‘co-terminosity’. This issue should be taken forward through the neighbourhood statistics initiative.

4.16. There was also some suggestion made during our consultations that Data Protection legislation is poorly understood by agencies and organisations with potentially valuable datasets and this may be hindering the exchange of information.
**Index of Deprivation**

4.17. We were clear from the outset that our remit did not include the development of an index of rural deprivation. Indeed, we noted that the current approach taken in the existing Index of Area Deprivation, which was based on concentrations of deprivation, was not particularly appropriate for the scattered nature of rural deprivation. Nevertheless, we are encouraged that the Scottish Executive will be taking forward work to develop a new Index of Deprivation, which may enable rural deprivation to be picked up through the Neighbourhood Statistics initiative. We understand that a revised Index will be developed towards the middle of 2003.

**Equality Information**

4.18. The understanding of the relationship and interplay between rurality and equality issues – age, gender, ethnicity and disability – is important, and at present, data limitations have hindered the ability both to understand fully the differences caused by rurality and to measure the social justice milestones for rural equality groups. Few datasets, apart from the Census, are currently able to be disaggregated for both rural Scotland and to measure equality groups and remain statistically valid for the Scottish population. We welcome the improvements to data on equality groups planned by the Executive in that equality issues should be ‘mainstreamed’ in the collection, analysis and publication of statistical information – so that equality data are seen as a fundamental part of any dataset. This work will be taken forward through the day to day work of the statisticians group in the Scottish Executive and more widely, through the neighbourhood statistics initiative.

**Population Migration**

4.19. A particular problem with measuring social exclusion issues, both in a rural and urban context, is that people often move to overcome problems, secure employment or housing and so on. Research has found that rural people may respond to disadvantage by moving away and “remove the evidence of the problem”. Similarly, people (often with few problems of exclusion) move to rural areas because of their attractiveness. We recognise that it is difficult to develop adequate measures that can reflect the impact of population movements. Data collected over time (‘longitudinal’ data) may help here.

**Health Data**

4.20. Several of the social justice milestones measure key health issues and we consider that alternative sources of data to those already used could usefully be explored. There is a need for consistent and coherent health information to be collected across Scotland. Currently NHS Boards hold and collect a considerable amount of performance information, and general information about the health of the local population (for example, lifestyle surveys). However, this information is seldom collected for the same time period or using the same definitions. It is, therefore, difficult to use the information for comparisons across Scotland. It is also important that data are postcode referenced where possible, so that flexible analysis of different geographic areas is possible.

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Recommendations

R4.6  The Scottish Executive should use the Neighbourhood Statistics initiative to improve organisations’ understanding and implementation of Data Protection legislation.

R4.7  In developing the new Index of Deprivation, the Scottish Executive should develop indicators that will accurately measure deprivation across both rural and urban communities.

R4.8  We welcome the commitment of the Scottish Executive to the further development of equality information and encourage the initiative to provide data for a range of equality issues and across a range of small area geographies.

R4.9  We welcome the scoping study commissioned by the Scottish Executive on longitudinal research requirements. It is vital that rural data needs are included in the strategic framework for action resulting from this study.

R4.10 Improvement to health data and associated issues such as priorities, data linking and confidentiality should be addressed by the Scottish Executive within Neighbourhood Statistics initiative.

Conclusion

4.21  It is important that quantitative data alone is not relied upon to measure the changes in social exclusion in both rural and urban areas. Whilst good quantitative data can help the design of policies and programmes and ensure they are delivered where and how they are needed, statistics can only reveal part of the picture.

4.22  Part of the problem of why poverty and social exclusion is hard to measure is because of the need for robust statistical analysis to be anonymous and ‘objective’. This is clearly difficult to achieve when the actual numbers (although not necessarily proportion) of people living in poverty or experiencing social exclusion in particular parts of rural Scotland are relatively small. Our consultations have shown that this, combined with the diverse nature of the rural population, can lead to problems being statistically invisible when we try to measure them. In addition, statistics, notwithstanding their shortfalls, may record factually how many people are living in rural poverty, but not contribute to our understanding of the processes that produce poverty and social exclusion.

4.23  Making use of local and professional staff knowledge and qualitative data can help to put statistics in context. Our consultations and qualitative evidence have shown, for instance, that there are many features of rural life - such as low crime rates, a strong sense of community, peaceful and beautiful surroundings - that are highly valued by rural dwellers and which counterbalance perceptions and experiences of disadvantage.
<table>
<thead>
<tr>
<th>Milestone</th>
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<th>Data Source issue</th>
<th>Recommendation</th>
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</table>
| 1 | Reducing the proportion of our children living in workless households | Source: Spring quarter of Labour Force Survey (LFS) | • Short-term analysis of the LFS using an Unitary Authority based rural definition to assess any general rural/urban problem
• Scottish LFS postcoded data to be passed by ONS to the Executive
• Research into the seasonality of rural unemployment and the best indicators to measure patterns of seasonality
• Rural benchmarking of other quarters (using alternative data source) required to ascertain whether seasonal employment causes a problem with measurement for rural areas
• Enhancements to LFS could ensure statistically reliable rural information to be available at UA level
• Use local area statistics to offer consistent and comparable definition of unemployment rate for urban/rural areas. |

The sample size of approx. 6,000 households (13,000 individuals) each quarter is suitable to use an aggregate definition of rural Scotland. The Executive receives a dataset from ONS with Unitary authority information attached, although this dataset does not allow individuals within households to be identified. The dataset which contains household information does not contain the Unitary Authority (UA) information. Postcoded data is held by ONS but not currently passed on to the Executive.

Whilst the whole of Scotland is covered, interviews north of the Caledonian Canal are undertaken by telephone with samples drawn from the telephone directory, excluding those without a phone & those registered as ex-directory.
<table>
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<tr>
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<th>Sample size &amp; coverage</th>
<th>Recommendation</th>
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<tbody>
<tr>
<td>2</td>
<td>Reducing the proportion of our children living in low income households</td>
<td>The Households Below Average Income dataset from the Family Resources Survey (FRS); and the British Household Panel Survey (BHPS). The FRS has a sample size in Scotland of 2,000 households, roughly 4,000 individuals. From 1991-98 the BHPS Scottish sample size less than 500 households. From October 1999 the survey was expanded to cover an additional 1,500 households (approx. 2,700 individuals). The sample size of both surveys is too small, even when used across rural Scotland in aggregate, to generate robust estimates. Earlier years of both the BHPS and FRS did not cover area north of the Caledonian Canal. However, from 2001/2 the FRS will cover the whole of Scotland, and the Scottish booster sample of the BHPS covers the whole of Scotland. Income information is not currently available at a sub-Scotland level from the FRS and work is underway to improve knowledge base so that analysis can be carried out at sub-Scotland level in future.</td>
<td>Rural benchmarking (using alternative data source) required to measure extent of low income in rural areas</td>
</tr>
<tr>
<td>3</td>
<td>Increasing the proportion of our children who attain the appropriate levels in reading, writing and maths by the end of Primary 2 and Primary 7</td>
<td>A national annual survey of 5-14 Attainment levels. All publicly funded schools in Scotland. Data is available at a school level and each school has a postcode address. Implementation of National Management Information System (NMIS) will allow records to be held at individual student level, which could also mean availability by home postcode.</td>
<td>Rural benchmarking (using a postcode-based definition) required to measure whether there are any significant differences between children at rural schools and those at urban ones.</td>
</tr>
<tr>
<td>4</td>
<td>All of our children will have access to quality care and early learning before entering school</td>
<td>Annual census of pre-school education centres and UA grant application data collected by the Executive. Information is available on the number of places funded, at a UA level. Population figures are also available for 3 and 4 year olds at UA level. Implementation of NMIS will allow records to be held at individual student level, which could also mean availability by home postcode – however, NMIS implementation for the pre-school sector is not a priority.</td>
<td>Rural benchmarking (using UA based definition) required to measure whether uptake is greater or lower in rural areas compared to urban. Commission research to measure access, against model of access developed, to quality care and early learning before entering school in rural areas.</td>
</tr>
<tr>
<td>Milestone</td>
<td>Data Source</td>
<td>Sample size &amp; coverage</td>
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<tr>
<td>5 Improving the well-being of our young children through reductions in (1) the proportion of women smoking during pregnancy, (2) the percentage of low birth-weight babies, (3) dental decay among 5 year olds, and (4) by increasing the proportion of women breastfeeding</td>
<td>(1) (2) and (4) Monthly data available through Information Services Department (ISD), NHS. (3) Survey every 2 years on 5 year olds by the Dental Health Services Research Unit, Dundee University.</td>
<td>(1) (2) (3) and (4) full postcode data available. For (3), children are also identified by standard school code. For (4) the information does not include the Northern Health Boards and therefore an urban/rural split is not possible.</td>
<td>• Rural benchmarking (using a postcode based definition) required to measure whether there are differences between rural and urban areas</td>
</tr>
<tr>
<td>6 Reducing the number of households with children living in temporary accommodation</td>
<td>HL2 returns - the quarterly summary statistical return on the operation of the homeless persons legislation. Data includes all households in temporary accommodation having been placed there by a local authority under the homeless persons legislation. The lowest level the data is available at is the UA and a rural-urban split would have to be based on a rural UA definition.</td>
<td></td>
<td>• Research project to examine occurrence of those living in temporary accommodation who are not placed there under homeless persons legislation • Rural benchmarking (using UA based definition) required to measure whether uptake is greater or lower in rural areas compared to urban.</td>
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</table>
### YOUNG PEOPLE

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<tr>
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<th>Recommendation</th>
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<tbody>
<tr>
<td>7 Halving the proportion of 16-19 year olds who are not in education,</td>
<td>Source: Spring quarter of Labour Force Survey (LFS)</td>
<td>Whilst the sample size of approx. 6,000 households (13,000 individuals) each quarter is suitable to use an aggregate definition of rural Scotland, the sample of young people may be small. The Executive receives a dataset from Office of National Statistics (ONS) with Unitary authority information attached, although this dataset does not allow the 16-19 age band to be identified. The dataset which allows the 16-19 band to be calculated does not contain the UA information. Postcoded data is held by ONS but not currently passed on to the Executive. Whilst the whole of Scotland is covered, interviews north of the Caledonian Canal are undertaken by telephone with samples drawn from the telephone directory, excluding those without a phone &amp; those registered as ex-directory.</td>
<td>• Short-term analysis of the LFS using an UA based rural definition to assess any general rural/urban problem</td>
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<td>training or employment</td>
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<td>• Scottish LFS postcoded data to be passed by ONS to the Executive</td>
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<td>• Research into the seasonality of rural unemployment and the best indicators to measure patterns of seasonality</td>
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<td>• Rural benchmarking of other quarters (using alternative data source) required to ascertain whether seasonal employment causes a problem with measurement for rural areas</td>
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<td>• Enhancements to LFS could ensure statistically reliable rural information to be available at local authority level</td>
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<td>• Use local area statistics to offer consistent and comparable definition of unemployment rate for urban/rural areas.</td>
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<td>• Disaggregated rural data should be made available and rural benchmarking (using a postcode based definition of rural schools) undertaken when data available to measure extent of problem in rural areas.</td>
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</tbody>
</table>
| 8 All our young people leaving local authority care will have achieved at  | This milestone cannot be measured at present.                               | No data available to separate out individuals in care who are sitting Scottish Qualifications Authority (SQA) exams. NMIS is being developed to enable these data to become available.  
A new collection of data on aftercare from UAs will follow after the results of ongoing research into aftercare services provided to care leaver has been completed and considered.  
No data is presently collected on care leavers’ access to housing options. UA level data only available at present for care leavers. School level data only is available at present for qualifications, although home postcode information for candidates will be available through NMIS from 2003. |                                                                                           |
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<tr>
<td>9</td>
<td>SQA qualifications dataset.</td>
<td>Only school level data available at present for qualifications, although home postcode information for candidates will be available through NMIS from 2003.</td>
<td>• Rural benchmarking (using a postcode based definition) required to measure differences between rural and urban areas</td>
</tr>
<tr>
<td>10</td>
<td>Annual Attendance and Absence Survey in Scotland by the Executive.</td>
<td>School level data only available at present and each school has a postcode address. NMIS will allow records to be held at individual student level, which could also mean availability by home postcode.</td>
<td>• Rural benchmarking (using a postcode based definition) required to measure differences between rural and urban areas</td>
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<tr>
<td>11 (1)</td>
<td>ONS Survey ‘Smoking, drinking and drug use among young teenagers’</td>
<td>In 1998 the ONS survey interviewed about 3,500 young people and this may be too small a sample to measure rural-urban differences. Postcode sector information is available.</td>
<td>• Rural benchmarking (using alternative data sources, such as the Scottish Health Survey) should be explored • Research project to measure access to professional services, using model of ‘access’ developed</td>
</tr>
<tr>
<td>11 (2)</td>
<td>ISD SMR01 and SMR02 Monthly data.</td>
<td>All recorded teenage pregnancies. Full postcode information is available, but low numbers make analysis difficult.</td>
<td>• Rural benchmarking (using a postcode based definition) required to measure extent of problem in rural areas</td>
</tr>
<tr>
<td>11 (3)</td>
<td>GROS quarterly death data.</td>
<td>All deaths data is held with full postcode information but low numbers make analysis difficult.</td>
<td>• Rural benchmarking (using a postcode based definition) required to measure extent of problem in rural areas</td>
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<tr>
<td>12 No-one has to sleep rough</td>
<td>A range of measures will be reported in the next Social Justice Annual Report. These will include indicators to give information on, for example, availability of accommodation and assessment of number of people still sleeping rough. Also, 2 questions on rough sleeping have been added and agreed for collection via the housing act statistics (homelessness applications) which are currently subject to changes in their data capture.</td>
<td>The first data trawl using the system devised took place in May 2001 and will be repeated in the Autumn of that year. Similar exercises may be repeated in future years to monitor the Programme for Government Target, due to report end 2003. Neither probability nor non-probability based samples can be drawn from the rough sleeping population with any accuracy given that the entire population is not known. We would not envisage any modelling to compensate for this, as the exercise is too complex and unreliable. The current method represents a pragmatic way of capturing both quantitative and qualitative data to give information on the extent of rough sleeping in any given area and various aspects of the need and response at the time of data capture. Data will be available at LA and national level.</td>
<td>The rural dimension and the need for rural benchmarking need to be considered in the development of data</td>
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<td><strong>Milestone</strong></td>
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<td><strong>Data Source issues</strong></td>
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<tr>
<td>13 Reducing the proportion of unemployed working age people</td>
<td>Source: Spring quarter of Labour Force Survey</td>
<td>The sample size of approx. 6,000 households (13,000 individuals) each quarter is suitable to use an aggregate definition of rural Scotland. The Executive receives a dataset from ONS with Unitary authority information attached, although this dataset does not allow individuals within households to be identified. The dataset that contains household information does not contain the UA information. Postcoded data is held by ONS but not currently passed on to the Executive. Whilst the whole of Scotland is covered, interviews north of the Caledonian Canal are undertaken by telephone with samples drawn from the telephone directory, excluding those without a phone &amp; those registered as ex-directory.</td>
<td>• Short-term analysis of the LFS using an Unitary Authority based rural definition to assess any general rural/urban problem • Scottish LFS postcoded data to be passed by ONS to the Executive • Research into the seasonality of rural unemployment and the best indicators to measure patterns of seasonality • Rural benchmarking of other quarters (using alternative data source) required to ascertain whether seasonal employment causes a problem with measurement for rural areas • Enhancements to LFS could ensure statistically reliable rural information to be available at local authority level • Use local area statistics to offer consistent and comparable definition of unemployment rate for urban/rural areas.</td>
</tr>
<tr>
<td>14 Reducing the proportion of working age people with low incomes</td>
<td>The Households Below Average Income dataset from the Family Resources Survey (FRS); and the British Household Panel Survey (BHPS).</td>
<td>The FRS has a sample size in Scotland of 2,000 households, roughly 4,000 individuals. From 1991-98 the BHPS Scottish sample size less than 500 households. From October 1999 the survey has been expanded to cover an additional 1,500 households (approx. 2,700 individuals). The sample size of both surveys is too small, even when used across rural Scotland in aggregate, to generate robust estimates. Earlier years of both the BHPS and FRS did not cover north of Caledonian Canal. However, both now cover the whole of Scotland.</td>
<td>• Rural benchmarking (using alternative data source) required to measure extent of low income in rural areas</td>
</tr>
<tr>
<td>Milestone</td>
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<td>Sample size &amp; coverage</td>
<td>Recommendation</td>
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<tr>
<td>15</td>
<td>Source: Spring quarter of Labour Force Survey</td>
<td>The sample size of approx. 6,000 households (13,000 individuals) may be too small to apply an aggregate definition of rural Scotland to sub-groups within the sample. In particular, the sample of ethnic minorities may be too small to allow rural analysis. The Executive receives a dataset from ONS with UA information attached, although this dataset does not allow individuals within households to be identified. The dataset that contains household information does not contain the UA information. Postcoded data is held by ONS but not currently passed on to the Executive. Whilst the whole of Scotland is covered, interviews north of the Caledonian Canal are undertaken by telephone with samples drawn from the telephone directory.</td>
<td>• Rural benchmarking (using the LFS) should be undertaken for lone parents, people aged 50+ and disabled people where the sample size allows, or alternative sources considered (e.g. SHS) • Alternative data sources to measure progress of ethnic minority groups need to be explored or developed, with thought given to how this might be taken forward for rural areas</td>
</tr>
<tr>
<td>16</td>
<td>Data collected by the Higher Education Statistics Agency and compiled by the Higher Education Funding Council for England on behalf of all UK Funding Councils.</td>
<td>Full admin data of all participants in higher education rather than a sample survey. Postcodes of students’ home address held.</td>
<td>• Rural benchmarking (using a postcode based definition) required to measure differences between rural and urban areas • Conduct analysis on income status and disadvantage to ascertain whether there are differences between urban and rural students</td>
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<tr>
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<tr>
<td>17</td>
<td>(a) Annual Census of occupied beds in hospitals (ISD Scotland (SMR4)) (b) Annual Census of Nursing Homes (ISD Scotland (ISD(S)34)) (c) SEHD Community Care Statistics (R1) (e) SEHD Community Care Statistics (D1-B) (d) Indicator no longer being used</td>
<td>(a), (b), (c) &amp; (e) Full census rather than a sample survey. Data held includes postcodes: (a) postcode of hospital (b) postcode of establishment (c) postcode of establishment (e) postcode of centre</td>
<td>• Collection of spatial information on individuals • Commission research to measure access to home help assistance for carers in the home; and access to establishments with a ‘homely environment’, using model of access developed</td>
</tr>
<tr>
<td>18</td>
<td>Scottish Health Survey</td>
<td>The sample in 1998 covered approx. 9047 adults and 3892 children. Postcode information is attached to the data.</td>
<td>• Disaggregated rural data (using a postcode based definition) should be made available • Research project to measure access to professional services</td>
</tr>
<tr>
<td>18</td>
<td>GROS Death data</td>
<td>All deaths data is held with full postcode information.</td>
<td>• Rural benchmarking (using a postcode based definition) required to measure differences between rural and urban areas</td>
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## OLDER PEOPLE

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<tr>
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<th>Recommendation</th>
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<tbody>
<tr>
<td>19</td>
<td>Reducing the proportion of older people with low incomes</td>
<td>The Households Below Average Income dataset from the Family Resources Survey (FRS); and the British Household Panel Survey (BHPS).</td>
<td>The FRS has a sample size in Scotland of 2,000 households, roughly 4,000 individuals. From 1991-98 the BHPS Scottish sample size less than 500 households. From October 1999 the survey has been expanded to cover an additional 1,500 households (approx. 2,700 individuals). The sample size of both surveys is too small, even when used across rural Scotland in aggregate, to generate robust estimates. Earlier years of both the BHPS and FRS did not cover north of Caledonian Canal. However, from 2001/02 the FRS will cover the whole of Scotland, and the Scottish booster sample of the BHPS covers the whole of Scotland.</td>
</tr>
<tr>
<td>20</td>
<td>Increasing the proportion of working age people contributing to a non-state pension</td>
<td>Family Resources Survey by the DSS</td>
<td>The FRS has a sample size in Scotland of 2,000 households, roughly 4,000 individuals. The sample size is too small, even when used across rural Scotland in aggregate, to generate robust estimates.</td>
</tr>
<tr>
<td>Milestone</td>
<td>Sample size &amp; coverage</td>
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<tr>
<td>21 Increasing the proportion of older people able to live independently at home</td>
<td>Full census (a)</td>
<td>SEHD Community Care Statistics (H1)</td>
<td>Disaggregated rural data (using postcode based definition) should be made available.</td>
</tr>
<tr>
<td>21 Increasing the proportion of older people able to live independently at home</td>
<td>Full census (b)</td>
<td>SEHD Community Care Statistics (D1-B)</td>
<td>Disaggregated rural data (using postcode based definition) should be made available.</td>
</tr>
<tr>
<td>21 Increasing the proportion of older people able to live independently at home</td>
<td>EA level only (a)</td>
<td>Data not currently collected centrally but work is currently being taken forward to collect this information.</td>
<td></td>
</tr>
<tr>
<td>21 Increasing the proportion of older people able to live independently at home</td>
<td>postcode of centre (b)</td>
<td>However, there is no spatial information on individuals’ area of residence and this is likely to differ from area of service provision (i.e. postcode of establishment) in some cases.</td>
<td></td>
</tr>
<tr>
<td>22 (1) Increasing the number of older people taking exercise</td>
<td>Full census (a)</td>
<td>Scottish Health Survey</td>
<td>Disaggregated rural data (using postcode based definition) should be made available.</td>
</tr>
<tr>
<td>22 (1) Increasing the number of older people taking exercise</td>
<td>Full census (b)</td>
<td>Scottish Health Survey</td>
<td>Disaggregated rural data (using postcode based definition) should be made available.</td>
</tr>
<tr>
<td>22 (1) Increasing the number of older people taking exercise</td>
<td>Small survey numbers are unlikely to give robust urban/rural breakdowns.</td>
<td>Scottish Health Survey</td>
<td>Disaggregated rural data (using postcode based definition) should be made available.</td>
</tr>
<tr>
<td>22 (2) Reducing the rates of mortality from coronary heart disease of older people</td>
<td>All deaths data is held with full postcode information.</td>
<td>GROS Death data</td>
<td>Disaggregated rural data (using postcode based definition) should be made available.</td>
</tr>
<tr>
<td>22 (2) Reducing the rates of mortality from coronary heart disease of older people</td>
<td>CMRS currently covers 70 GPs and records approx. 80,000 doctor/patient contacts each month.</td>
<td>CMRS Death data</td>
<td>Disaggregated rural data (using postcode based definition) should be made available.</td>
</tr>
<tr>
<td>22 (3) Reducing the prevalence of respiratory disease</td>
<td>CMRS currently covers 70 GPs and records approx. 80,000 doctor/patient contacts each month.</td>
<td>Continuous Morbidity Recording Scheme (CMRS)</td>
<td>Disaggregated rural data (using postcode based definition) should be made available.</td>
</tr>
<tr>
<td>22 (3) Reducing the prevalence of respiratory disease</td>
<td>CMRS currently covers 70 GPs and records approx. 80,000 doctor/patient contacts each month.</td>
<td>Continuous Morbidity Recording Scheme (CMRS)</td>
<td>Disaggregated rural data (using postcode based definition) should be made available.</td>
</tr>
<tr>
<td>23 Reducing the fear of crime among older people</td>
<td>5000 households</td>
<td>The Scottish Crime Survey</td>
<td>Disaggregated rural data (using postcode based definition) should be made available.</td>
</tr>
<tr>
<td>23 Reducing the fear of crime among older people</td>
<td>Postcode data held by survey company. And therefore data could be split into rural and urban.</td>
<td>The Scottish Crime Survey</td>
<td>Disaggregated rural data (using postcode based definition) should be made available.</td>
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## COMMUNITIES

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<th>Recommendation</th>
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<tbody>
<tr>
<td>24 Reducing the gap in unemployment rates between the worst areas and the average rate for Scotland</td>
<td>Claimant count figures from ONS and estimates of economically active residents from GROS population Census.</td>
<td>Areas defined on 91 Census Ward boundaries.</td>
<td>• Rural benchmarking required to measure differences between rural and urban areas</td>
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<td>• A ward based definition of rural needs to be developed, whilst recognising that area-based measures are often not wholly applicable to rural Scotland where poverty can be interspersed amongst relative affluence</td>
</tr>
</tbody>
</table>
| 25 Reducing the incidence of (1) drugs misuse in general and (2) of injections and sharing of needles in particular | (1) ONS Survey 'Smoking, drinking and drug use among young people'; and the Scottish Crime Survey.  
(2) The Scottish Drugs Misuse Database. | (1) ONS Survey can only identify if the young person is resident in Strathclyde or the rest of Scotland. Full postcode is available but the numbers may be too low to break down by rural/urban.  
In 1998 around 3,500 young people were interviewed.  
(2) 96% of records had a valid postcode at district level in 1999/00 | • Rural benchmarking required to measure differences between rural and urban areas |
<p>|                                                                           |                                                                             |                                                                                  | • Commission research on access to drug misuse and pharmaceutical services, using model of access developed |
|                                                                           |                                                                             |                                                                                  | • Disaggregated rural data should be made available, although sample may be too small |
|                                                                           |                                                                             |                                                                                  | • Further research needed |
| 26 Reducing crime rates in disadvantaged areas                             | Central Recorded crime statistics collected by the Executive.                |                                                                                  | • Disaggregated rural data should be made available |</p>
<table>
<thead>
<tr>
<th>Milestone</th>
<th>Data Source</th>
<th>Sample size &amp; coverage</th>
<th>Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Increasing the quality and variety of homes in our most disadvantaged communities</td>
<td>Scottish House Condition Survey (SHCS), Scottish Household Survey (SHS), SE surveys of local authorities and Scottish Homes area based Social Inclusion Partnerships (SIPs).</td>
<td>SIP annual monitoring and appraisal arrangements. SHCS in 1996 covered a sample of around 18,000 dwellings and around 17,000 households throughout the whole of Scotland. Scottish Household Survey – a continuous survey of approx. 15,500 private households per annum, throughout the whole of Scotland. SHS full postcode data available. Published by 6-fold urban/rural classification. UA level data after 2 years. National level data available quarterly. SE surveys cover all local authorities, and, via Scottish Homes, all housing associations. Results from SE surveys available at UA level.</td>
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<tr>
<td>28</td>
<td>Increasing the number of people across all communities taking part in voluntary activities</td>
<td>Scottish Household Survey</td>
<td>Scottish Household Survey – a continuous survey of approx. 15,500 per annum. Full geographical coverage of Scotland. SHS full postcode data available. Published by 6-fold urban/rural classification. UA level data after 2 years.</td>
</tr>
<tr>
<td>29</td>
<td>Accelerating the number of households in disadvantaged areas with access to the Internet</td>
<td>Scottish Household Survey, and area based SIPs.</td>
<td>Scottish Household Survey – a continuous survey of approx. 15,500 per annum. Full geographical coverage of Scotland. SHS full postcode data available. Published by 6-fold urban/rural classification. UA level data after 2 years.</td>
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</tbody>
</table>
ANNEX A: SUMMARY OF RECOMMENDATIONS

Access to services

R2.1.1 **Communities and local service providers**, including **local authorities, NHS Boards, the local representatives of the Employment Service and Benefits Agency, and local enterprise companies**, should engage with rural communities, through the community planning process, to plan the provision of key services and draw up a strategy for local delivery. In doing this they should:

- consider when transport should be provided to services and which services can be accessed locally (i.e. brought to the community);
- ensure that services are delivered in a way that is sensitive to the visibility of accessing services within the local community; and
- consider supporting the diversification or expansion of local voluntary schemes to provide services which alleviate poverty and social exclusion.

R2.1.2 Each **local authority, NHS Boards, the voluntary sector and the Community Transport Association** should come together with local communities to carry out an audit of existing transport provision for local communities (including provision contracted from private operators) and consider whether the best use is being made of existing transport. This should include:

- ensuring that current transport provision is timetabled to maximise access to education, training, employment and essential services; and
- an audit of existing vehicles and transport routes with a view to greater transport co-ordination to maximise usage.

R2.1.3 **The Scottish Ambulance Service** should assess, in co-operation with other service commissioners and providers, the current level of provision of services in and across rural areas and how these might be improved. These considerations might include:

- a study of levels of service provision in different areas of rural Scotland; and
- the identification of existing good practice.

R2.1.4 **The Scottish Executive** should, contingent upon the findings and recommendations from R2.1.3 above, issue a leaflet to clinicians who consider the transport requirements of patients. The leaflet should give details of the travelling expenses schemes available, and encourage clinicians to bring these schemes and local community patient transport schemes to the attention of their patients.

R2.1.5 **Communities and equality groups** should engage, through the community planning process, with **service providers** (including **local authorities, NHS Boards and the Scottish Ambulance Service**), **transport operators** and the **Community Transport Association**, to

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24 The Executive should approach the Department for Work and Pensions regarding recommendations for the Employment Service and Benefits Agency. This applies to recommendations throughout the report.
ensure that adequate transport provision is made for disadvantaged groups within the local community. The following issues should be looked at:

- reduced fares for low income groups;
- accessible transport for those with mobility problems; and
- affordable patient transport.

Maximising household income

**R2.2.1** We recommend that the Scottish Executive undertakes work to assess the nature of employment markets in rural areas.

**R2.2.2** We recommend that Scottish Enterprise and Highlands and Islands Enterprise should work together to develop a strategy to encourage the growth of sustainable rural economies. In doing so, we recommend that the following issues are considered:

- ensuring that Local Economic Fora are linked into the community planning process and that any review of local partnership working produces a holistic approach to rural economic development at the local level; and
- support for small-scale enterprise and community not-for-profit enterprise, which promote rural social inclusion and have the potential to create modest employment opportunities.

**R2.2.3** Steps should be taken to address the lack of qualified childminders in rural areas; and assistance should be offered with training and provision of childcare services. We recommend that:

- local Childcare Partnerships and the Scottish Childminding Association work together to disseminate existing good practice on identifying and training childminders in rural areas;
- there is liaison between the Employment Service, Local Enterprise Companies and local Childcare Partnerships to identify potential childminders; and
- Local Enterprise Companies and the Scottish Executive should support the development of childcare services in rural areas as a direct means of employment; and to enable parents to seek employment.

**R2.2.4** We recommend that the New Deal Rural Issues Sub-Group and the Employment Service take forward the following work to build upon the flexibility incorporated into the New Deal and:

- issue guidance which encourages employers to take full advantage of the flexibility incorporated in the New Deal; and
- evaluate local good practice and hold an annual event to disseminate rural good practice.

**R2.2.5** We recommend that the Scottish Executive's Digital Scotland Unit should make rural issues a key consideration in the development of its broadband and digital inclusion strategies, and that the composition of the Digital Scotland Reference Group should ensure that rural interests are adequately represented.
R2.2.6 We recommend that the Scottish Executive approaches the Department for Work and Pensions to ask them to work with the Inland Revenue and CoSLA to develop strategies to maximise benefits and tax credit take-up throughout rural Scotland. In doing so, we recommend that the following be taken forward:

- research to establish the level of benefit take-up in rural Scotland, identifying particular groups who may be under-claiming;
- identifying ways of co-ordinating delivery of benefits through cross-cutting working, minimising the bureaucracy for those applying for benefits;
- considering how benefit providers can work more closely with the local voluntary sector to facilitate the dissemination of information on benefits available;
- regular evaluation of the best ways of reaching target claimant groups in rural areas, with resource allocations set by benefits providers taking the higher cost of delivery of the service into account; and
- dissemination of existing good practice on rural initiatives that have achieved an increase in benefit uptake, and a reduction in the stigma associated with claiming.

R2.2.7 We recommend that the Inland Revenue and local authorities should consider whether they should offer reimbursement to benefits claimants of expenses, where personal attendance at a central office is required in order for an individual to access benefits. All benefits providers should ensure that their employees provide advice to claimants about such schemes.

R2.2.8 We recommend that the Department for Work and Pensions and local authorities conduct a review to ensure that allocations of funding to offices servicing rural areas of Scotland take full account of the higher cost of delivering the service in rural areas, including outreach services.

Housing

R2.3.1 We endorse the recommendations contained in the recent report of the Rural Partnership for Change and recommend that that the Scottish Executive commission further research on RTB and subsequent re-sales at an early date.

R2.3.2 Local authorities and housing associations should develop policies to ensure, as far as possible, that disadvantaged and equality groups are allocated housing which suits their needs and enables reasonable access to essential services and employment.

R2.3.3 We recommend that the Scottish Executive and Scottish Homes should consider, when developing national resource allocation methodologies for housing investment, the level of dedicated accommodation for homeless households and the capacity of a local authority to respond to homelessness.
Health

R2.4.1 We recommend that, in line with the principles set out in the Scottish Health Plan ‘Our National Health: a plan for action, a plan for change’25, rural health professionals, RARARI and NHS Boards should build on and strengthen existing networking arrangements to enable them to work with rural communities to take forward work on developing a strategy to address local and national rural health priorities. This should include:

- the identification of the factors that affect the health of individuals, population groups and communities in rural areas; and
- the development of a strategy, to be led and implemented by the NHS Boards, to explicitly address the reduction of health inequalities in rural areas.

R2.4.2 The Health Education Board (Scotland) and NHS Boards should ensure that health messages and health promotion activities are co-ordinated and targeted to achieve maximum penetration in rural areas.

R2.4.3 We recommend that NHS Boards and local authorities should consider, under the auspices of community planning, how to ensure that disadvantaged groups in rural areas can access health and social care services by subsidising or providing transport to services or outreach services. We recommend that the following specific issues are considered:

- provision of pharmaceutical services to disadvantaged groups in rural communities;
- provision of patient transport for poor and socially excluded rural dwellers, in conjunction with the Scottish Ambulance Service (also see R2.1.3); and
- funding for specialist healthcare and social work services, such as projects dealing with drug misuse and mental health.

R2.4.4 Drug Action Teams and Alcohol Misuse Co-ordinating Committees should work closely with rural communities, NHS boards, local authorities, local drugs and alcohol projects, GPs and pharmacists to take forward the planning of confidential and accessible services for substance misusers in all rural communities, providing outreach services where necessary. In addition, the Scottish Executive’s proposed national plan for action on alcohol misuse should take account of the needs of rural communities.

R2.4.5 NHS Scotland and NHS Boards should consider how to ensure that people in rural areas can access contraception when their own GPs will not prescribe on moral grounds.

R2.4.6 Highlands and Islands Enterprise and Scottish Enterprise in their business support role, should work closely with the National Diet Action Co-ordinator, NHS Boards, HEBS and the Scottish Consumer Council, under the auspices of the Scottish Community Diet Project, to examine issues surrounding food availability and affordability in rural areas and roll out good practice from the rural projects funded through the Community Food Initiative.

R2.4.7 We recommend that the Physical Activity Task Force considers the extent to which rural issues affect physical activity and that its strategy for improving participation rates takes into account the specific circumstances of rural communities.

25 Ibid.
Joint working

R2.5.1 We recommend that statutory, non-statutory and voluntary bodies should work together with communities, under the auspices of community planning, to develop a co-ordinated approach to the delivery of services, either locally or by facilitating attendance at a central location, for disadvantaged people in rural areas. Where these arrangements already exist, service delivery should be reviewed on a regular basis, to ensure that the needs of disadvantaged people in the community continue to be met.

R2.5.2 We recommend that local authorities, education and training providers, the Benefits Agency, the Employment Service and NHS Boards should work together under the auspices of community planning to consider:

- how to offer support to voluntary bodies which are already providing multiple services to excluded groups and communities in rural areas;
- what scope there is for increasing the number of workers delivering multiple services; and
- how the terms and conditions, and training for multi-skilled workers delivering multiple services can be rationalised to make such posts more attractive.

Children

R3.1.1 The Scottish Executive should measure access to free pre-school provision for 3 and 4 year olds, once a reasonable model of access has been developed (see R4.2 in Section B).

R3.1.2 Local authorities and rural Childcare Partnerships should commission a study on access to pre-school care within their local areas. This should include or take account of:

- consultation with rural communities to determine community demand for various methods of delivery – for example centralised or outreach pre-school services;
- a feasibility study into the use of school transport to access centralised pre-school provision within the area; and
- good practice within the local authority area, considering how such information can be disseminated on an annual basis both locally and nationally.

R3.1.3 Local authorities and pre-school umbrella bodies, such as the Scottish Pre-school Play Association, should ensure that small-scale pre-school providers, who are essential to the accessible provision of pre-school care within a rural community, are adequately supported as regards meeting HMI quality standards and administrative requirements.

Young people

R3.2.1 We recommend that schools, employers, local partnerships and voluntary projects should work together and share good practice on bringing excluded young people back into the community and to reduce the negative image that young people sometimes have within the community.
R3.2.2 Local authorities and transport operators should consider setting up concessionary public transport schemes for young people travelling to employment, until they receive their first wage.

R3.2.3 The Scottish Executive should ask local authorities to report on the housing situation of young people leaving care.

Families

R3.3.1 Community planning partners should consider with Jobcentre Plus and Pension Service, education and training providers and the voluntary sector, innovative ways to identify (from the local community or elsewhere), train and retain qualified staff who provide essential services, often to disadvantaged groups within the local community. This might cover childcare, health and social care, and housing and benefits advice, and should include:

- an audit of existing good practice in identifying potential trainees locally and attracting/retaining qualified employees within remote and rural areas; and
- considering ways to publicise opportunities to potential trainees, especially those groups which are disadvantaged in the labour market, such as lone parents and ethnic minorities, outwith formal rural employment networks.

Older people

R3.4.1 The Scottish Executive and CoSLA should commission a study to build upon the information gathered in the Scottish Household Survey and evaluate good practice in providing services to older people in rural areas. This might be undertaken as a follow-up to the evaluation of the BGOP pilots and should make recommendations on the following:

- raising awareness amongst older people of available services and entitlements;
- provision of services, including health services, in ways that are sympathetic to the needs of older people in rural areas;
- reducing the stigma attached to claiming benefits;
- innovative ways of identifying older people in need and ensuring that they receive holistic service provision;
- questions which should be included in the Scottish Household Survey in future years; and
- existing good practice.

R3.4.2 Support, both in-kind, financial and advisory should be made available to support voluntary and charitable projects which deliver services to rural older people. In particular:

- The Scottish Executive should consider making “services for older people” a theme for a future round of the Rural Challenge Fund. Applicants should demonstrate that they have actively engaged with older people in developing such services.
- Local authorities, NHS Boards, the Department for Work and Pensions and the Inland Revenue should jointly consider ways in which they can support voluntary
or charitable projects which are providing services to older people, and are complementary to their roles as statutory service providers.

Communities

R3.5.1 Local and national agencies should always consider rural poverty and exclusion issues when creating new policies. This is especially important for all agencies operating in a mixed urban/rural environment, where policy may traditionally have focused on the urban context.

R3.5.2 We recommend that community capacity building in rural communities is encouraged by ensuring that:

- **community planning partnerships** in mixed rural/urban local authority areas have a specific forum for considering and addressing rural needs;
- **local partners** under the umbrella of the **community planning partnership**, provide resources and support to rural communities and voluntary organisations to target programmes/activities towards specific disadvantaged groups; and
- **rural communities** work together to promote the interests of all residents, including those who are excluded or disadvantaged.

R3.5.3 The Scottish Executive should work with the three main equality bodies, the Commission for Racial Equality, the Equal Opportunities Commission and the Disability Rights Commission and the Equality Network, to build upon existing research and experience in order to develop an understanding of the experiences of different equality groups in rural Scotland and to come up with measures to ensure their full participation and involvement in national and local policy development.

Short-term data

R4.1 The Scottish Executive should provide an urban/rural breakdown of all 29 milestones and their associated indicators, using available data sets to produce a comparative indication of the situation in rural Scotland.

Medium-term data

R4.2 The Scottish Executive should develop a methodology for measuring and monitoring access to services in rural areas, including a methodology to measure perceptions of access.

R4.3 We recommend that the Scottish Executive develops the results of the Rural Scotland Price Survey and Rural Scotland Expenditure Survey to model differences between rural and urban incomes, price levels and trends over time.

R4.4 We recommend that the Scottish Executive explores alternative data sources and uses them to measure progress in tackling poverty in rural areas in the medium-term, before results from the neighbourhood statistics initiative (see below) are available.
**Long-term data**

**R4.6** The Scottish Executive should use the Neighbourhood Statistics initiative to improve organisations’ understanding and implementation of Data Protection legislation.

**R4.7** In developing the new Index of Deprivation, the Scottish Executive should develop indicators that will accurately measure deprivation across both rural and urban communities.

**R4.8** We welcome the commitment of the Scottish Executive to the further development of equality information and encourage the initiative to provide data for a range of equality issues and across a range of small area geographies.

**R4.9** We welcome the scoping study commissioned by the Scottish Executive on longitudinal research requirements. It is vital that rural data needs are included in the strategic framework for action resulting from this study.

**R4.10** Improvement to health data and associated issues such as priorities, data linking and confidentiality should be addressed by the Scottish Executive within Neighbourhood Statistics initiative.
ANNEX B – REMIT AND MEMBERSHIP

Remit:

“To improve understanding of rural social exclusion in Scotland, including ensuring that existing indicators are appropriately developed for and measurable in rural areas; and recommend ways of promoting social inclusion in rural areas.”

Membership

<table>
<thead>
<tr>
<th>Name</th>
<th>Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Douglas Greig (Chair)</td>
<td>Scottish Executive</td>
</tr>
<tr>
<td>Helen Betts-Brown</td>
<td>Scottish Council of Voluntary Organisations</td>
</tr>
<tr>
<td>Brian Chaplin</td>
<td>Western Isles Health Board</td>
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<tr>
<td>Norma Graham</td>
<td>Fife Rural Partnership</td>
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<tr>
<td>Chris Higgins</td>
<td>Highlands &amp; Islands Enterprise</td>
</tr>
<tr>
<td>David Nicol</td>
<td>Scottish Homes</td>
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<tr>
<td>Leo Sherry</td>
<td>South Lanarkshire Council</td>
</tr>
<tr>
<td>Roger White</td>
<td>Aberdeenshire Council</td>
</tr>
<tr>
<td>Jennifer Whyte</td>
<td>Stirling Council Policy Unit</td>
</tr>
<tr>
<td>Lindsay Wood</td>
<td>Scottish Enterprise Borders</td>
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ANNEX C: SUMMARY OF CONSULTATION RESPONSES

Tackling Rural Poverty and Social Exclusion

Issues

1. The main causes of poverty and social exclusion were as identified as being the structure of the labour force and local economies, the decline of traditional, locally based industries, lack of access to employment and services (both access to transport and to services delivered locally). Lack of affordable and accessible transport, limited access to welfare benefits advice leading to a poor take up of benefits and limited childcare services were the most frequently highlighted services.

2. The main groups identified as being most affected by poverty and social exclusion were young people who have left school with limited qualifications, the elderly, women, lone parents and low income households. Those who had experienced problems with substance misuse had difficulty when trying to reintegrate with society. Ethnic minorities and people suffering from a serious illness or other health problems felt that service providers in rural areas overlooked their needs. Other respondents also mentioned LGBT and travelling people as groups that experience social exclusion in rural areas.

Good Practice

3. There were many examples of good practice listed in the responses to the questionnaire, including community transport schemes, initiatives for women and youth activities. Many of the initiatives were focused on the issue of service provision and were often designed to plug gaps in service provision in the absence of mainstream services.

4. One common frustration expressed was that money was usually available to support pilot projects, but it could be difficult to secure ongoing support after the initial period of funding had ended. Although this would apply equally to projects in urban areas, it was thought that this approach had a worse effect in rural areas, where voluntary groups often provided basic services that might be provided by a statutory body or private business in an urban area.

Working with others

5. The importance of partnerships as a means of working with others to ensure the co-ordinated delivery of local services was emphasised by many respondents. However, problems were encountered when encouraging agencies to work together as they may, at times, have different operational arrangements, including different planning and financial systems. Cultural factors could also prove to be a barrier, especially when organisations had a long-term history of not co-operating with one another. It was suggested that better communication and training might provide ways of overcoming these issues.

Barriers

6. A significant problem cited by service providers dealing with social exclusion was funding, both in terms of the limitations on available monies, and the duration for which particular grants will fund a project (usually three years). In the absence of further funding, many service providers have attempted to overcome this barrier by developing partnerships with other service providers, so that information and resources could be pooled.
7. Lack of interest or support from the local community was identified as being a factor that can impact very negatively on a project’s chances of success, which was why it was important to consult and involve the community from the early stages.

8. Sometimes, the local community erected barriers that made it difficult for service providers to tackle and people to overcome social exclusion. This was particularly pertinent when projects were established to tackle sensitive issues, such as prejudice towards certain groups of people or those with ‘socially unacceptable’ problems, such as drug and alcohol misuse. Awareness campaigns were identified as being a possible way of overcoming this problem.

**Data Issues**

**Data collected by respondents**

9. Respondents to the consultation exercise made use of a wide range of local data to inform work on poverty and social exclusion issues. Local Authorities make use of data from various departments such as social work, education, welfare and housing to inform work on poverty and social exclusion. Some local authorities have developed innovative datasets such as service availability and location to help measure social exclusion.

10. NHS Boards and other health related organisations collected a variety of data. Those mentioned included: lifestyle surveys (carried out every 3 years); health profiles based on census data; and locality reviews as main sources of data.

11. Several other organisations that responded gathered data on social exclusion as part of their work (i.e. administrative data). The Citizen’s Advice Bureau (CABx) kept very comprehensive case records on every client, every contact with clients, and the outcomes of assistance (e.g. with benefit applications, appeals and other awards). All CABx collated these statistics and report to Citizens’ Advice Scotland on a monthly basis. Typical information collated included: gender; age; ethnicity; employment status; income and benefits; disability; marital status and dependants; referral agency; address; debt details – name and amount owed to creditors where appropriate. Detailed statistics are kept on the financial gain to clients as a result of assistance to claim benefit. In addition, user surveys are carried out on a 3 yearly cycle to determine the profile of client’s accessing the service and their representativeness of the local population. Some CABx responses suggested that more use could be made of the vast amount of CABx administrative data.

**Use of data produced by others**

12. Many respondents used published data or data collected by others rather than their own datasets for useful information on poverty and exclusion. In particular, the Census and benefit take-up (DWP) data were used by many to inform their work. The Census was particularly valued as it gives a good range of socio-economic data at a small geographical level.
13. Data collected by Local Authorities by a variety of departments is widely used by others, as well as data from Police Forces and NHS Boards. Other data used included:

- NOMIS (unemployment, youth and long term unemployment, seasonality)
- Mid-year population estimates and population projections
- Annual Employment Survey
- Scottish House Condition Survey
- New Earnings Survey
- Register of Sasines (average house prices, alongside New Earnings Survey above to assess affordability)
- Rural Scotland Price Survey
- Data produced by SIPs
- Data collected by the local Employment Service
- Monthly unemployment statistics

Data problems/issues

14. Several responses noted that because there was little data collected with the primary aim of measuring poverty and social exclusion (and particularly rural poverty and social exclusion), data was not entirely suitable for measuring this phenomenon in any meaningful way.

15. Some respondents - mainly public sector organisations, often working in partnership together – reported few difficulties in obtaining data from other organisations. However, difficulties cited with using data to measure poverty and social exclusion included an unwillingness to release data, limited staff/other resources, and limited understanding of the Data Protection Act. A factor that was mentioned by a number of respondents (especially public sector organisations) was that the lack of standardisation of data collected by organisations throughout Scotland resulted in difficulties in comparing data between different areas of Scotland and in achieving consistency in measuring aspects of poverty and social exclusion on a Scotland-wide basis.

16. Limitations in the usefulness of data due to its age was also highlighted by some. For example, many noted that whilst the Census was useful initially, it quickly became outdated.

17. Data protection and ‘ethical’ issues were raised by the majority of the respondents. All said they were unable to share confidential information (e.g. individual client/case records) and anything under Data Protection Act. However, some felt there was inadequate knowledge of Data Protection legislation. The commercial confidentiality of certain types of data was mentioned by some Local Enterprise Companies.

18. Several noted that they are not always aware of the information held by different organisations, and therefore they do not make the best use of potentially useful data.

Gaps and improvements in data

19. Almost all respondents felt that there was a lack of small area data in general due to the poor disaggregation of national statistics and small sample sizes of national surveys, which made measurement in rural areas extremely difficult.
20. Most noted that knowledge of data collected by different organisations could be improved and suggested that organisations could publicise the types of data/information they hold, with a clear description of its purpose and content. A few suggested that more data could be more easily accessible via the internet.

21. The Commission for Racial Equality noted that data sources, other than the census, rarely simultaneously disaggregate for ethnicity and remain statistically valid for the Scottish population.

22. Issues where respondents felt the rural angle was not being addressed statistically included access to employment and services (in terms of both transport and local availability), incomes, cost of living, and employment and the rural labour market.

23. It was considered that there was a need to develop appropriate alternatives to area-based indicators as it is people and not places that suffer poverty and social exclusion. With area-based indicators and datasets, the sparsity and heterogeneity of rural population can prevent the identification of people experiencing poverty.

Research

24. Some respondents had undertaken research into a range of different aspects of poverty and social exclusion. They also utilised research from other sources, such as government and research institutions. Many respondents commented that it would be useful to establish a national database of research into rural poverty and social exclusion issues.

25. Respondents reported that research, especially when combined with sufficiently detailed statistical information, enabled the development of local strategies for tackling poverty and social exclusion; and sometimes helped with the targeting of resources and initiatives.
We would like to thank the following organisations and individuals for taking the time to complete the questionnaire:

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Contact</th>
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<tbody>
<tr>
<td>Aberdeen City Council</td>
<td>Kincardine Estate</td>
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<tr>
<td>Alex Dillon</td>
<td>Kirkliston Community Education Centre</td>
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<td>Angus Council</td>
<td>Laggan Community Association</td>
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<td>Angus Rural Partnership</td>
<td>Lanarkshire Primary Care NHS Trust</td>
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<td>Angus Transport Forum</td>
<td>Loch Ewe Action Forum</td>
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<td>Lochaber Communications Network Ltd</td>
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<td>Ayrshire and Arran Primary Care NHS Trust</td>
<td>Lochaber Ltd</td>
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<tr>
<td>Barra Citizens Advice Bureau</td>
<td>North Forth Valley LHCC</td>
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<td>Perth Cyrenians</td>
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<td>Royal Scottish Agricultural Benevolent Institution</td>
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<td>Commission for Racial Equality Scotland</td>
<td>Scottish Enterprise Borders</td>
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<td>CVS Fife</td>
<td>Scottish Enterprise Dumfries and Galloway</td>
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<td>Scottish Landowners Federation</td>
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<td>Scottish Low Pay Unit</td>
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<td>Fife Racial Equality Council</td>
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<td>Formartine Partnership</td>
<td>Shetland Council of Social Service</td>
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<tr>
<td>Health Promotions, Grampian Health Board</td>
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<td>Stirling Voluntary Association</td>
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<tr>
<td>Highlands and Islands Enterprise</td>
<td>The Prince’s Trust – Scotland</td>
</tr>
<tr>
<td>Keith Community Education Area Management Committee</td>
<td>Wishaw/Shotts/Newmains LHCC</td>
</tr>
</tbody>
</table>
ANNEX D: CONTACT DETAILS FOR PROJECTS VISITED

This section provides contact details for projects and organisations visited by the rural Poverty and Inclusion Working Group. We would like to extend our thanks to everyone who helped to organise the visits and to the people who participated in them.

The following projects provided us with information on rural poverty and social exclusion within their area of work, and are used to highlight examples of good practice throughout the report.

Shetland Childcare Partnership  
91/93 St Olaf Street  
LERWICK  
Shetland

Boyndie Trust  
The Old School  
Boyndie  
Banff  
Aberdeenshire AB45 2JT

Buchan Dial-a-Community Bus  
Area Office  
Nethermuir Road  
Maud  
Aberdeenshire

Firth and Mossbank Community House  
43 Sandside  
Firth Mossbank  
Shetland ZE2 9TE

Ballantrae Rural Initiative Care in the Community  
38a Main Street  
Ballantrae  
South Ayrshire KA26 0NB

Dicks Hill Pathfinder Project  
Dicks Hill Resource Centre  
86-92 John Simpson Drive  
Stranraer  
Dumfries & Galloway DG9 7PW

Wigtown Booktown Company  
26 South Main Street  
Wigtown  
Dumfries & Galloway DG8 9EH
Kelloholm Sun Project
Unit 7, Business Enterprise Centre
Greystone Avenue
Kelloholm
Dumfries & Galloway DG4 6RB

Better Government for Older People
Old Dingleton Hospital
Melrose
Borders TD6 9YG

Tweed Horizons Centre Sustainable Technology
Newtown St Boswells
Melrose
Borders TD6 0SG

Rural Resource Centre
Tweed Horizons
Melrose
Borders TD6 0SG

Moray Youth Action
7 Parade Spur South
Pinefield Industrial Estate
Elgin
Moray

Forres Challenge Project
Forres House Community Centre
High Street
Forres
Moray

Teenage Parents Project & Health Development Worker
Winchester House
1 King Street
Elgin
Moray

sing Services
Staney Hill Homelessness Project
Fort Road
LERWICK
Shetland ZE1 0LW

Shetland Drugs Project
7 Harrison Square
LERWICK
Shetland
We would also like to thank the following organisations for their help in arranging and hosting visits:

- Aberdeenshire Council
- Argyll and Bute Council
- Dumfries and Galloway Council
- Shetland Isles Council
- South Ayrshire Council
- Scottish Enterprise Borders
- Moray Youthstart Social Inclusion Partnership
- Inverary Primary School
- Ardchonnel Primary School
- Kilmartin Primary School
- Aberdeenshire Housing Partnership
- Dumfries & Galloway Citizens' Advice Service