



OFFICIAL REPORT  
AITHISG OIFIGEIL

DRAFT

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## Tuesday 19 September 2023

### CONTENTS

	<b>Col.</b>
<b>TIME FOR REFLECTION</b> .....	1
<b>TOPICAL QUESTION TIME</b> .....	3
American XL Bully Dogs (Ban) .....	3
School Support Staff (Planned Strike) .....	5
<b>DRUG LAW REFORM</b> .....	9
<i>Motion moved—[Elena Whitham].</i>	
<i>Amendment moved—[Sue Webber].</i>	
<i>Amendment moved—[Jackie Baillie].</i>	
The Minister for Drugs and Alcohol Policy (Elena Whitham) .....	9
Sue Webber (Lothian) (Con) .....	15
Jackie Baillie (Dumbarton) (Lab) .....	20
Alex Cole-Hamilton (Edinburgh Western) (LD) .....	24
Collette Stevenson (East Kilbride) (SNP) .....	27
Russell Findlay (West Scotland) (Con) .....	29
Ben Macpherson (Edinburgh Northern and Leith) (SNP) .....	31
Paul Sweeney (Glasgow) (Lab) .....	33
John Mason (Glasgow Shettleston) (SNP) .....	35
Gillian Mackay (Central Scotland) (Green) .....	38
Bill Kidd (Glasgow Anniesland) (SNP) .....	41
Brian Whittle (South Scotland) (Con) .....	43
Jackie Dunbar (Aberdeen Donside) (SNP) .....	45
Michael Marra (North East Scotland) (Lab) .....	48
Audrey Nicoll (Aberdeen South and North Kincardine) (SNP) .....	51
Annie Wells (Glasgow) (Con) .....	53
Bob Doris (Glasgow Maryhill and Springburn) (SNP) .....	56
Pauline McNeill (Glasgow) (Lab) .....	58
Sandesh Gulhane (Glasgow) (Con) .....	60
The Minister for Social Care, Mental Wellbeing and Sport (Maree Todd) .....	63
<b>DECISION TIME</b> .....	69
<b>COUNCIL TAX (CONSULTATION)</b> .....	76
<i>Motion debated—[Willie Rennie].</i>	
Willie Rennie (North East Fife) (LD) .....	76
John Mason (Glasgow Shettleston) (SNP) .....	79
Liz Smith (Mid Scotland and Fife) (Con) .....	81
Michael Marra (North East Scotland) (Lab) .....	82
Stephen Kerr (Central Scotland) (Con) .....	84
The Minister for Community Wealth and Public Finance (Tom Arthur) .....	86

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# Scottish Parliament

*Tuesday 19 September 2023*

*[The Presiding Officer opened the meeting at 14:00]*

## Time for Reflection

**The Presiding Officer (Alison Johnstone):** Good afternoon. The first item of business is time for reflection, and our time for reflection leader today is the Rev Eder Ferraz Goncalves, pastor, Perth Baptist church.

**The Rev Eder Ferraz Goncalves (Perth Baptist Church):** Good afternoon, Presiding Officer and members of Parliament. It is a pleasure to be here and to be able to serve the nation in this way.

My family and I came from Brazil to Scotland in 2008. From the beginning, we felt welcomed and embraced by its people. Throughout the years, we have learned to love this land and to cherish its people, but also how to complain about the weather as if we were born here.

The most incredible thing about Scotland is not its rich history or its wild landscape, and obviously not its climate, but, I believe, God's love for this nation and the potential of its people. It is through and with people, not just policies, that lives are connected, creativity is released and communities are formed.

As a follower of Jesus, I believe that his life, death and resurrection make a way for individual and community transformation. I dare say that there are many misconceptions about what Christ stands against, but one should pay careful attention to what his life and message stand for.

During a time of widespread discouragement, when people were not sure which way to go, Jesus said, "I am the Way." His way models a life of transformative relationships, transcendent purpose, relatable values and relational faith.

During a time of cultural confusion, when people did not know what to believe or whom to trust, Jesus said, "I am the Truth." His truth models integrity, simplicity, inner peace and freedom. Truth in Christ is not a mere concept to be explored but a person to be encountered.

During a time of economic inequality, when people did not have equal opportunity or hope of change, Jesus said, "I am the Life." His life models compassion, generosity, selfless love and sacrificial living. The life of Christ redeems the past, restores the present and reassures us that there is a life worth living.

During a time of widespread hopelessness, Christ brought hope and achieved his goals not by merely speaking about them, but by taking up his cross and sacrificially giving himself for every human soul: those he loved and represented, and even those who persecuted him; the rich and the poor; the weak and the powerful; the locals and the foreigners.

The Way, the Truth and the Life of Christ enrich dialogues, rebuild trust, transform communities, encourage creativity and call Scotland and its people to be all that they can be.

Ultimately, Christ's life, death and resurrection compel us to surrender our ego, change our ways, take up our daily cross and live out our lives not for ourselves only, but in the service of others.

Thank you.

**The Presiding Officer:** Thank you.

## Topical Question Time

14:04

### American XL Bully Dogs (Ban)

1. **Jamie Greene (West Scotland) (Con):** To ask the Scottish Government what consideration it has given to introducing a ban on American XL bully dogs, in light of a series of reported attacks involving such dogs. (S6T-01548)

**The Minister for Victims and Community Safety (Siobhian Brown):** We all share the horror at recent reported attacks and deaths due to XL bully dogs, and my thoughts are with all of those impacted.

We have noted the intention of the United Kingdom Government to take steps to introduce a ban on American XL bully dogs. Last Friday, Scottish Government officials met with Department for Environment, Food and Rural Affairs officials and officials from Wales and Northern Ireland to discuss and hear more about the UK Government's proposed approach. The UK Government plans to convene an expert group to specify a legal definition of the American XL bully. The group will consist of a body of people concerned with animal welfare, veterinary science and practice and breeds of dogs, and it will include representatives from the police and the four nations. That work, when carried out, will inform our consideration of any ban moving forward.

**Jamie Greene:** I thank the minister for that update. Naturally, all our thoughts are with the families of those affected by the recent fatalities and attacks. In the light of the spate of attacks, urgent action must be taken, and I welcome the UK Government's swift response to that end. However, there are many schools of thought out there about how we should deal with so-called dangerous dogs, ranging from an outright ban, as is the case in this scenario, to better enforcement of existing breeding and ownership laws.

In addition to the consultation and liaison with the UK Government stakeholders, what expert stakeholder advice will the Scottish Government take and what public consultation will it undertake before reaching its conclusions? Given the urgency and the public safety issues, when might we expect a firm decision on the matter?

**Siobhian Brown:** I agree with the member that what matters is making a careful, evidence-based decision that is focused on protecting public safety in Scotland. We are committed to giving full consideration to the issue, to ensure that we arrive at the correct decision. It is clear from the UK Government's announcement that there are a wide range of views in the area, from experts and

members of the public, and it is imperative that the Scottish Government, in moving forward, considers all voices. I do not currently have a timescale for the consultation, but I will keep the member updated.

**Jamie Greene:** I am sure that Parliament would appreciate that, as would the general public. There are many responsible dog owners out there who may also have reservations about forthcoming legislation and what that means for their pet ownership.

Back in January this year, I raised with the former First Minister the serious issue of serious organised criminal gangs that use extreme breeding techniques to create fashionable hybrid breeds such as the American XL bully. Often, the dogs are maltreated and poorly bred and have severe health problems. They are treated as valuable commodities and are often sold to irresponsible owners. I know that it is a very difficult debate about whether there are bad dogs out there or simply bad owners and bad breeders.

I reiterate the questions that I asked the former First Minister earlier this year. What progress has the Scottish Government made since then on the potential toughening of, or even simple enforcement of, the many existing laws that govern extreme breeding, illegal breeding and irresponsible dog ownership in Scotland?

**Siobhian Brown:** We have established an operational working group involving local authorities, Police Scotland, the Convention of Scottish Local Authorities and other key stakeholders to progress that important work, and we publish updated statutory guidance to help local authorities to carry out their functions under the control of dogs legislation.

I know that there is a lot of concern out there in the general public and among people who may have certain breeds of dogs, so it is important to get the message across and emphasise that, if a dog is a banned breed, that does not automatically mean that it will be put down. There are conditions that can be met, such as having the dog neutered or spayed or keeping the dog muzzled in public, and the dog can be placed on the index of exempted dogs by the court. That index is operated by DEFRA on a UK-wide basis.

**Stephen Kerr (Central Scotland) (Con):** I want to reiterate a point that Jamie Greene made. What are the minister's conclusions on the argument about whether the issue is to do with bad dogs or bad owners whose mistreatment of dogs leads them to behave in a certain way? Where will the emphasis be?

**Siobhian Brown:** The vast majority of dog owners are responsible people who take good care of their animals, but a small minority of

owners fail to keep their dogs under proper control and do not have the same responsible attitude as the general public does. The Scottish Government is committed to ensuring that that is addressed.

### **School Support Staff (Planned Strike)**

**2. Martin Whitfield (South Scotland) (Lab):** To ask the Scottish Government what its response is to reports of a planned strike by school support staff, including janitors, cleaners, caterers and school support assistants, over pay and conditions. (S6T-01551)

**The Minister for Local Government Empowerment and Planning (Joe FitzPatrick):** Local government pay negotiations are a matter for local authorities as employers and for unions. The Scottish Government and the Convention of Scottish Local Authorities have committed to respecting that negotiating arrangement as part of the Verity house agreement.

However, strikes in our schools are in the interest of no one, including pupils, parents and carers, who have already had to deal with significant disruption over the past three years. We continue our engagement with COSLA on how staff and services are supported this year and next year, and we urge all parties to engage meaningfully in negotiations to avert strikes.

**Martin Whitfield:** With more than three quarters of Scotland's schools facing closure later this month, it is clear that support staff in our schools are rapidly losing confidence in the Scottish Government. The Government has for too long neglected the support staff who work tirelessly to keep schools running. It is time for the Government to take swift action and to meet union representatives to deliver a fair deal for our staff. Will the minister commit to meeting Unison to deliver such a deal?

**Joe FitzPatrick:** The Government is committed to continuing to work in partnership with our local government colleagues and to respecting their role as employers. As I said in my first answer, the Government is engaging with local government and will continue to do so.

Striking would not be the first choice of our employees and staff across schools in Scotland. They know how important the work that they do is to children, parents and carers, so they have not come easily to the decision to get a strike mandate. We all need to respect the fact that they have it and ensure that we all get round the table and have meaningful discussions. However, we need to respect local government's role as the employer and to respect local government colleagues' mandates.

**Martin Whitfield:** I am grateful for that answer from the minister, because Roz Foyer, the general

secretary of the Scottish Trades Union Congress, has said that, if we want to stop workers feeling compelled to take strike action in the face of a cost of living crisis, the Government must present a fair offer. She said:

"The unions have been waiting for five months"

and inflation remains high. Workers need a decent pay rise.

Our parents, pupils, janitors, cleaners, caterers and school support assistants all deserve that, so will the minister confirm that the Verity house agreement is not a shield to protect the reputation of the Scottish Government but should be a vehicle for adequate sensible funding to support hard-working staff across the education sector?

**Joe FitzPatrick:** The Verity house agreement is an important opportunity for us—not just the Government but the whole Parliament—to reset our relationship with local government. For too long, we have treated local government as if it was the deployment arm of the Parliament, whether for Government or members' bills. We need to respect the democratic mandate of our local government colleagues.

The Government has intervened and taken action in relation to the local government settlement in order to support our local government colleagues. To allow for the initial meaningful pay rise, £155 million was added to the settlement. Last month, we gave reassurance to councils on an additional £94 million to increase recurring costs on the offer that they had made in order to allow them to make a further offer. We continue to have discussions with COSLA on how resources can be found to settle the dispute without the need for strike action, but we all need to be conscious of the very challenging financial position that not only the Scottish Government but local authorities face.

**Fulton MacGregor (Coatbridge and Chryston) (SNP):** The right to strike is actively upheld and supported in Scotland, but our neighbours clearly do not always share the same values, as is demonstrated by the United Kingdom Government's abhorrent anti-strike legislation. Will the minister commit to always upholding the right to strike in Scotland?

**Joe FitzPatrick:** The Scottish Government strongly opposes any bill that undermines legitimate trade union activity and does not respect fair work principles. It is our long-standing position that a progressive approach to industrial relations—along with greater, not less, protection for workers—is at the heart of a fairer, more successful society.

The UK Government's Strikes (Minimum Service Levels) Act 2023 directly contradicts the

Scottish Government's position. The Scottish Government, alongside trade union and local authority partners, opposed the bill that became the Trade Union Act 2016, and we continue to call for its repeal.

**Liam Kerr (North East Scotland) (Con):** Last year, £46 million was cut from college and university budgets to fund pay deals in schools. Pitting different parts of the education system against one another represents an egregious Government failure. Will the minister confirm that, if he grants any additionality, it will not come from the education budget and will not lead to cuts in other portfolios?

**Joe FitzPatrick:** Conservative members—including Liam Kerr, in particular—fail to understand basic economics. It is not possible to continue coming here and asking for additional resources for X or Y without suggesting where the additional resources should come from. The Scottish budget is fully committed. If we are to make changes and further support our services, we will have to make adjustments across the budget.

It is lucky that we did not listen to the Conservatives about a year ago, when Liz Truss announced her disastrous budget, which has had implications for local authorities and public authorities, not only in Scotland but across the United Kingdom, as they have had to face unprecedented levels of inflation in year.

**Stephen Kerr (Central Scotland) (Con):** It is quite remarkable that our focus and attention are not on our children and young people. After what our country and young people have been through, there will now be more strikes. Setting aside the point that the Scottish National Party has been defunding local government for the past decade, what contingency plans are in place to support children and young people in their learning? Is there a plan in place for virtual and remote learning? Please tell us what the contingency plan is to support not those who will be striking but children and young people.

**Joe FitzPatrick:** Stephen Kerr actually makes a very good point. The Government, our COSLA partners and our trade union colleagues are keen to settle the dispute without strike action because we want to avoid the damage that the action would cause to children. As members would imagine, the Cabinet Secretary for Education and Skills is in discussions with our local government colleagues about the mitigations that would need to be put in place and how we can have a consistent approach to achieving those.

I go back to one of the other points that Stephen Kerr made. In spite of the swingeing cuts from the UK Government to this Government and

Parliament, local government had a real-terms increase in funding of £793 million this year. That is a real-terms increase of 3 per cent, and the Accounts Commission confirmed that local government funding is 2.6 per cent higher in real terms than it was in 2013-14.



## Drug Law Reform

### **The Presiding Officer (Alison Johnstone):**

The next item of business is a debate on motion S6M-10490, in the name of Elena Whitham, on drug law reform.

14:18

**The Minister for Drugs and Alcohol Policy (Elena Whitham):** Presiding Officer, I am pleased to open this afternoon's debate on drug law reform. I regret that I am unable to be there in person, due to being ill with Covid.

Problem drug use impacts on many people in Scotland. It leads to lives ending prematurely and tragically. In 2022, 1,051 lives in Scotland were lost to drugs and, although the number was lower than the number in 2021, it is still far too many. More than 1,000 families have lost a loved one, and I extend my heartfelt condolences to each one of them. The drug deaths emergency in Scotland remains a priority for the Government.

The topic of the debate is drug law reform. It sets out evidence-based actions that we would take, were we empowered to change the legal environment in which we find ourselves. No one should infer from that that we are not doing everything within our current powers to address the crisis, or that we will not continue to learn and adapt to meet the challenges that we face in the current legislation. However, there is clear evidence to show that much more could be achieved if we had the authority to fully implement the public health approach to which we are committed.

The principles upon which our national mission sit are that problematic drug use is rooted in poverty and trauma and is a health condition. That is why we are committed to reducing the number of people who are dying of overdose and to improving their lives.

The £250 million that is being spent during the current parliamentary session has already contributed significantly to that goal. The medication-assisted treatment standards are improving access and service delivery to people who are in need of treatment and support, and the number of approved residential rehab placements has grown to 812, including facilities that are specifically targeted at families and women with children.

Our naloxone distribution programme has won international acclaim and we are progressing our commitments to safer drug consumption facilities and drug-checking initiatives within our existing powers.

**Sue Webber (Lothian) (Con):** The minister mentioned that children and families are at the heart of trying to break the cycle and save lives. Why do we have social workers with increasing numbers of case loads and young people who will get less and less time with those invaluable social workers to help to break the cycle?

**Elena Whitham:** I recognise the concern that the member has just intimated. Our whole-family approach, which our whole family wellbeing fund underpins, will help to secure additional resources and support for those front-line social workers because we recognise their value in the lives of our families and young people across the country.

We are supporting a broad range of community-based initiatives and looking upstream to understand how we can support people to avoid drug-related crises at a much earlier stage in their lives. We know that childhood poverty and trauma are often factors in later drug dependence. Our Child Poverty (Scotland) Act 2017, which sets out targets to reduce the number of children who are experiencing the effects of poverty and our Promise to care-experienced young people, aims to improve outcomes for those young people and help them to achieve their potential.

Stigma drives people away from help and creates a raft of additional problems for people who use drugs and for their families, and we are setting out a plan to address that long-term problem. Through our charter of rights, which was drafted by the national collaborative—a group that is made up of a broad cross-section of our community, including people with lived and living experience—we will directly support people who have or are affected by problem substance use to claim their rights to the highest attainable standard of health.

All that work and more is currently under way as part of our public health approach. The so-called deterrent approach has been shown to be completely ineffective in reducing drug use, and to be counterproductive in addressing the underlying causes of that phenomenon. The Misuse of Drugs Act 1971 is more than 50 years old and was designed against the background and political environment of the time. However, the landscape has changed and the amount of international evidence that is available has grown.

I have given examples of the significant progress that has already been made to this point through our national mission, but current laws hamper our ability to implement further measures that are known to save lives, which is why we published our drug law reform paper "A Caring, Compassionate and Human Rights Informed Drug Policy for Scotland" in July, with the support and endorsement of the Global Commission on Drug Policy, which comprises former heads of state

from countries as diverse as New Zealand, Switzerland and Peru.

Our reform paper proposes immediate changes to the law that will allow us to implement fully a public health approach that has had significant results in a wide range of other countries by saving lives and encouraging people to seek support and treatment earlier than they do when they fear punishment. That approach includes: the provision of a clear statutory framework for supervised drug consumption facilities and drug checking across Scotland; increased access to life-saving naloxone through reclassification; changes to simplify and improve licensing to encourage use of the full suite of treatment options that are available to us, including heroin-assisted treatment; the removal of the stigmatising and discriminatory exemption in the Equality Act 2010 (Disability) Regulations 2010, which excludes drug dependency; and a commitment to full consideration of decriminalising drugs for personal use.

People are 16 times more likely to die of a drug death in Scotland in the poorest 20 per cent of the country than they are in the wealthiest 20 per cent. Criminalising our way out of a drug death crisis that is rooted in health and social issues often has the effect of punishing people from our poorest communities for being poor and having experienced trauma. The Government is clear. The war on drugs is over, no one won, and the main casualties were not organised criminals, but the poorest and most vulnerable people in our societies who need our help, not to be driven further into the margins of society.

We have learned from evidence around the world and have committed to reducing the harms that are associated with drug taking by promoting agency, helping people to make better choices and giving them accurate real-time information about substances and their effects. We continue to progress our plans for safer drug consumption facilities because the evidence that supports their efficacy is extensive—16 countries currently operate legal drug consumption rooms, all of which are effective in saving lives and improving health outcomes.

The proposed facilities are designed to comply with our current legislation so they will still be restricted by the Misuse of Drugs Act 1971 and will not fully meet the lowest threshold criteria that we would prefer, but they will be a positive start on our journey towards protecting all our citizens. The facilities will help to demonstrate efficacy at the national level, as they have been shown to do in other countries.

No country offers a single template for tackling drug use, but I make no apology for proposing approaches that have been shown to make a

positive difference. New Zealand and Canada in particular are investing in drug-checking services with as few barriers to access as is possible.

**Michael Marra (North East Scotland) (Lab):** Now that the barrier to piloting safe consumption rooms is out of the way and we can move ahead on that, what update can the minister give us about drug-checking services, which other ministers have claimed face similar barriers? Will she report on the Government's progress on delivering a pilot in that area?

**Elena Whitham:** In the past two years, the University of Stirling has undertaken work to look at how we could roll out a drug-checking pilot within Scotland. During that research phase, several potential locations were identified. We know that Aberdeen, Glasgow and Dundee have expressed their wish to be part of the pilot. The research was published at the end of July and we are now helping those areas to apply for licences. We await a final communication from the United Kingdom Home Office that will help us to ensure that those licensing applications can go in and will be met with the most sympathetic ear possible. I will keep members updated on that.

Accidental overdoses often occur because people do not know what is in the substances that they are taking. Scotland faces a significant challenge with street benzodiazepines, which are extremely variable in their make-up and strength. We must therefore seek to implement drug-checking measures that will lower the risk and keep people safer, particularly with the potential of even more dangerous synthetic drugs reaching our streets.

**Alex Cole-Hamilton (Edinburgh Western) (LD):** In her response to Michael Marra, the minister pointed to the real progress that is being made by her Government and I support it in implementing pilots. She has also spoken about red tape and the time that it has taken to prove the efficacy of those measures. We now have legal clarity about safer consumption facilities, but those facilities will at first be limited to Glasgow. What steps can the Government take to ensure that people who live outside Glasgow can see similar pilots being undertaken in other affected communities?

**Elena Whitham:** I share Alex Cole-Hamilton's desire to see safer consumption facilities and drug-checking facilities being rolled out across the country. Once the safer consumption pilot is up and running in Glasgow, we will evaluate it as soon as possible. After that, and once we understand how the facilities are working in practice, we will have conversations with other areas that might want to have the same type of facility available. We are still constrained, because the pilot is for a specific area, but I am happy to

have conversations with the Lord Advocate to see how we can progress that as swiftly as possible.

Our paper also proposes decriminalising all drugs for personal use, alongside holding a wider review of drug laws. The reaction to that proposal from certain quarters was as predictable as it was misinformed. Some have referred to a recent press report that paints a bleak picture of life in Portland, Oregon, where drugs were decriminalised in 2021 and have claimed that that wrought havoc in an already struggling city. I would say that that example indeed carries a lesson, which is that decriminalising drugs alone is not enough. A fully committed public health approach, such as the one that this Government has embarked on, is required to address the health and social problems of which drug use is a symptom.

When Portugal decriminalised drug use more than 20 years ago, it implemented a full range of treatment and support initiatives for people who use drugs, and that example has been followed by a number of other countries precisely because it works to reduce drug-related deaths and to increase take-up of treatment and support.

There are also people who claim that we already have de facto decriminalisation, which will be news to the police, who recorded 22,356 drug possession crimes last year—a figure that was 38 per cent of all crimes against society.

Thirty countries have recognised the harm that is caused by criminalisation and have moved to change their laws. That gives us more than a hint that a change in the law in Scotland would be consistent with the conclusions that experts across this area have reached. The fact is that decriminalisation is no longer a novel proposal. It is a transition that is supported by the chief executives of all 31 United Nations agencies, and it has been their position since 2018, when the United Nations System Chief Executives Board for Coordination agreed the first UN common position. It committed to

“promote alternatives to conviction and punishment in appropriate cases, including the decriminalisation of drug possession for personal use, and to promote the principle of proportionality, to address prison overcrowding and overincarceration by people accused of drug crimes”.

In our drug law reform paper, we propose further exploration of drug law with a focus on evidence and the reduction of harm. That means having a drug classification system that reflects the evidence of harms caused and not the political or moral judgments, as well as facilitating a conversation about reforms such as the regulation of substances in partnership with the public and the subject matter experts.

As with many things that we now see as common sense, that would have been radical once, but no more. Multiple committees, experts and independent organisations have already called for an urgent review of the Misuse of Drugs Act 1971, including the independent drug deaths task force, so there is a compelling case for changing our drug laws. However, we are currently unable to change those laws in line with international evidence. There are three possible roads out of that impasse.

It will surprise no one when I say that Scottish independence, which would allow us the freedom to make our own laws with, by and for the people of Scotland, is my preferred route to change. However, we know that the need for compassionate evidence-based drug laws transcends political alignment. It is about saving lives.

The second route would be for further powers to be devolved. Given that our two Governments disagree on the issue, the devolution of the necessary powers would allow Scotland to develop laws that properly reflect our different public health approach. That kind of devolution is not unheard of, as regional variations exist in other countries. Canada, Australia and even the United States have different legal frameworks on drugs operating within their countries.

However, the fastest and simplest way forward would be for the UK Government to review and change the Misuse of Drugs Act 1971 to support a public health approach across the UK.

We would welcome meaningful engagement on the proposals but, despite many attempts, that has not been forthcoming. Up to this point, our proposals have been rebuffed despite the cross-party Westminster Home Affairs Committee just last month recommending a review of the current drug laws and endorsing our position on safer drug consumption. We have long called for agreement from the UK Government to allow us to do that, whether to support us in establishing a full pilot or through devolving the necessary powers to do so.

First and foremost, people who are affected by drugs are people. They are deserving of kindness, respect and dignity. Our drug laws are, quite simply and literally, from another century. We need something that reflects what is required now, and that is laws that are not rooted in prejudice, assumption and moral judgments but are instead based on research, evidence and best practice from around the world. We need laws that reflect lived experience and the experience of families who are affected by drugs. We need caring, compassionate and human-rights-informed drug laws that will save and improve lives.

I end with a thank you and a plea. My thank you is to everyone who has contributed to the national mission, including many in this Parliament, and everyone who has helped to shape our approach to reducing the impact that drug use has on far too many lives and communities in Scotland. My plea is to those who remain to be convinced that drug law reform is required. I ask those people to look at the evidence of what works successfully elsewhere. Why should we not seize the opportunity to improve the life chances of so many people in Scotland?

I move,

That the Parliament believes that every life lost through drugs is a tragedy and recognises that behind each statistic is a grieving family and community; agrees that the scale of the drug deaths emergency in Scotland requires the Scottish Government to use every lever at its disposal to save and improve lives using the best available evidence; further agrees that the principles of the Scottish Government's national mission should be rooted in a human rights informed, public health approach, not a criminal justice one; believes that the support for people with substance dependency should be in parity with other health conditions, removing unnecessary stigma and discrimination; supports the calls for an urgent review of the Misuse of Drugs Act 1971 to fully align the law with the public health response outlined in the Scottish Government paper, *A Caring, Compassionate and Human Rights Informed Drug Policy for Scotland*, of which decriminalising drugs for personal use is one part, and agrees that the Scottish Government should work constructively with the UK Government to either amend the Misuse of Drugs Act 1971 or devolve the powers to Scotland to draft its own drugs legislation that better reflects international best practice.

**The Presiding Officer:** Members might wish to know that we have some time in hand this afternoon.

14:33

**Sue Webber (Lothian) (Con):** Maybe it is just me, Presiding Officer, but the sound in the chamber seems a bit strange today.

I welcome the chance to open for the Scottish Conservatives in this debate. I am sure that, across the chamber, we can all agree that each and every drug death is a tragedy, and there can be no doubt that our drug death crisis is an emergency. However, saying that repeatedly in the chamber, in reports and in press releases does not save lives. Under the SNP, drug-related deaths have spiralled out of control. Drug deaths in Scotland have more than doubled since the SNP came to power, and its current strategies to help those who are struggling with addiction have failed and are still failing.

**Ben Macpherson (Edinburgh Northern and Leith) (SNP):** Will the member take an intervention?

**Sue Webber:** I have just started my speech, but I might take an intervention in a moment, Mr Macpherson.

The strategies are just not enough or they are not being put in place fast enough where it matters on the front line. Scotland still has the highest drug death rate in Europe and, despite having the same drug laws, Scotland's drug deaths are nearly three times the rate observed elsewhere in the United Kingdom.

**Ben Macpherson:** I thank the member for taking an intervention. I appreciate that, as an Opposition member, she wishes to hold the Government to account, but does she agree that all the main parties in the chamber have been in power over recent decades and that, in many cases, the issues that we are confronting together in our communities are the result of decades of challenge and consideration? Would it not be better to have a collegiate approach to serving our communities better?

**Sue Webber:** I think that I accept the sentiment of what the member stated, but the SNP Government has been in control of these things in Scotland for 16 years, and it was the previous First Minister who, when she was health secretary—I cannot recall her exact title—cut the funding to our drug and rehabilitation services. That was the point at which our crisis began; that was point zero.

We must remember that, just last week, it was revealed that there have already been 600 suspected drugs deaths in the first half of 2023, which is an increase of 7 per cent on the same period last year. Implementing the MAT standards will help us in the fight against drugs deaths, yet the Scottish Government has missed its target of fully implementing the standards by April 2023. That is just another key missed target by the SNP and the Greens in their woeful handling of Scotland's drug death crisis—so much so that the Green members cannot even find the time to come to the chamber this afternoon.

Having already been forced to delay the full implementation of MAT standards by two years, because they were so far behind schedule, ministers failed to meet their revised interim target. Those standards were introduced to tackle that shocking record, so it is unacceptable that the nationalist coalition continues to fail to meet them.

At the beginning of the Parliament's summer recess, Humza Yousaf's drugs minister called for heroin, cocaine and all other drugs to be decriminalised, but doing so would encourage the organised crime gangs, which make fortunes from peddling their drugs on Scotland's streets.

The minister stated that lessons have been learned from around the world, so let us look at

places elsewhere in the world that bitterly regret that failed experiment. Portland, in Oregon, decriminalised drugs in 2021, but only earlier this month officials were forced to do a U-turn due to a marked increase in overdoses and deaths. They have claimed that the step brought a “brutal” amount of “human misery” to the Oregon city, and Portland police have reportedly logged record deaths since the state of Oregon decriminalised drugs.

Oregon is seen as one of America’s more progressive states, but Portland City Commissioner of Public Safety, Rene Gonzalez, said the city had seen the homeless population rise by 29 per cent and that there had been an increase in crime. He said:

“The amount of human misery is just brutal. It is truly horrific. Portland and Scotland share many values but the addictive qualities of these drugs are so brutal that it simply overwhelms your systems.”

**Alex Cole-Hamilton:** Sue Webber has cited for the chamber one international example, but does she recognise the strides that have been made by Portugal, which, until quite recently, had one of the worst drugs deaths rates in the world but which, through a model of decriminalisation, has brought that rate right down?

**Sue Webber:** I will correct this if required, but my understanding of what is happening in Portugal is that the recording of deaths has also changed, so I would not be quite that pointed in citing Portugal as a shining example.

After being told that Scotland had just 425 rehabilitation beds, the Democrat commissioner Rene Gonzalez said:

“I am deeply concerned. I would encourage Scotland to try to avoid the tragedy we’re going through, and if you’re going to go down this path, make a strong commitment to addiction services and emergency intervention.”

The Scottish Government recently announced funding of £14 million, which would increase rehabilitation beds across Scotland to almost 600. Those beds are vital, and they would be even more so if Scotland were to decriminalise drugs.

All of us across the chamber can agree that more action needs to be taken. However, the Scottish Conservatives do not support the decriminalisation of drugs. Decriminalising class A drugs will not help to tackle Scotland’s drug death crisis and could make it more difficult for the police to tackle the criminal gangs that profit from the trade and cause misery for our communities. It would do a disservice to Police Scotland, which works tirelessly, 24/7, to tackle those gangs.

I recently visited Children 1st’s office in Bathgate and met a woman who told me about the troubles that her daughter faced after she got caught up in cocaine use. That led to her using

other drugs, which ultimately meant that the girl’s life and her family’s life were shattered and torn apart. The woman whom I spoke to had to sell the family home to pay for rehabilitation for her daughter and to clear the debt that was hanging over the daughter and the threat to the girl’s life by the criminal gangs supplying the drugs. It is gangs such as those that could be encouraged by, and profit from, the decriminalisation of drugs.

We must have an approach that encompasses criminal justice, social justice and health. I agree that the issue of drug addiction must be treated as a public health emergency, but the Scottish Conservatives cannot agree with the way in which the Government motion undermines the important role of the justice system.

Project ADDER—addiction, diversion, disruption, enforcement and recovery—is yet another tool that could be used to help tackle our drug-related deaths, yet it is disappointingly viewed unenthusiastically by the Scottish Government. However, in Blackpool, a *Sunday Post* investigation found that project ADDER worked in part because it was making recovery a priority. The Scottish National Party-Green Government is just focused on decriminalisation and has no plans to get people off drugs.

Nevertheless, as a result of this continuing crisis, the Scottish Conservatives will not oppose the use of drug consumption rooms, specifically the pilot in Glasgow.

**Bob Doris (Glasgow Maryhill and Springburn) (SNP):** I listened really carefully. I do not agree with a lot of what the member has said, but I know that she is firm in her views. Would she agree that, irrespective of her own personal views, a full and proper review of the Misuse of Drugs Act 1971 is vital to test the proposition of the Scottish Government? We think that we are doing the right thing, but a full and proper review of that act is surely a positive way forward, irrespective of the views of people in this place.

**Sue Webber:** The situation that we are facing in Scotland is far graver than the situation that people are facing elsewhere in the United Kingdom, where exactly the same legislation is in place. We have to look internally at ourselves and what we are not doing to help save those lives.

We have serious reservations about drug consumption rooms and their operation, and we must remember that they are not a magic bullet and that they will not solve all our problems. However, it is vital that the Scottish Government takes every practical step that it can to tackle the epidemic of drug misuse that is sweeping our country.

I would like to ask the minister, Maree Todd, to answer the following questions in her contribution.

How does she foresee the Glasgow drug consumption rooms working on the ground? What will the evaluation methodology be and will it be made public? What will be measured? Just as importantly, will there be an independent assessment and review of the outcomes?

I have heard from people who work in drug rehabilitation services or are in recovery themselves, and they say that they would absolutely not oppose drug consumption rooms either, but they have a concern around the funding, which I share. Where will the money for the drug consumption room in Glasgow come from? Is it to come from the existing health and social care partnership budget? What other services are being cut to release the funds?

As I said, I have reservations about the effectiveness of drug consumption rooms, and the decision that the Lord Advocate made last week explains why. It confirmed that the SNP Government can proceed with a drug consumption room pilot if it wishes. The Lord Advocate gave the SNP one less hiding place when she removed the threat of prosecution from a consumption room pilot scheme in which class A drugs can be taken under supervision. Members should remember that the SNP Government previously insisted that that would require a change in UK law or independence. Neither has had to take place. That decision tells us that there was always a way for us to do that, and the SNP now has one less excuse for its failures.

Annemarie Ward from the drugs charity Faces & Voices of Recovery UK—Favor UK—has said that safe consumption rooms need to be underpinned by vital access to prescription programmes, detoxification and rehabilitation services, as laid out in the proposed right to addiction recovery (Scotland) bill.

It is now up to the SNP Government to demonstrate that safe consumption rooms can work, to back the crucial right to addiction recovery bill; and to finally start tackling the drug deaths crisis over which Nicola Sturgeon and, now, Humza Yousaf have presided.

I move amendment S6M-10490.1, to leave out from “be rooted” to end and insert:

“take both a public health and a criminal justice approach to target the serious organised crime gangs that target Scotland’s most vulnerable communities; believes that the support for people with substance dependency should be in parity with other health conditions, removing unnecessary stigma and discrimination; notes the Lord Advocate’s statement, which confirms her willingness to produce a prosecution policy statement enabling a drug consumption room facility to be set up without requiring any change to existing law; acknowledges that drug law is identical across the UK, yet drug-related deaths in Scotland are 2.7 times higher than the UK average; opposes the decriminalisation of drugs, which would make it more difficult to tackle the

criminal gangs that profit from this trade and cause misery for communities across Scotland, and supports tackling the problem of substance dependency by implementing the proposed Right to Recovery Bill, which would enshrine a right in law that those who need treatment are able to get it.”

14:45

**Jackie Baillie (Dumbarton) (Lab):** I start by wishing the minister a speedy recovery.

I open on a note of consensus with the minister: every life that is lost as a result of drugs is a terrible tragedy, and my thoughts are with those who have lost loved ones. In truth, far too many lives have been lost—since the Scottish Government declared the drugs crisis “a public health emergency” in 2019, more than 4,000 drug-related deaths have been recorded. The figures appear to be still rising, as 600 suspected drug deaths were recorded in the first six months of 2023, which is 7 per cent up on the same period last year.

I very much welcome the Lord Advocate’s announcement that there will be a presumption against prosecution of people who use safe consumption rooms, which removes the obstacle to providing such a facility on a pilot basis in Glasgow. It will be important to have an early shared understanding of how the facility will operate and what the evaluation framework looks like so that we can measure success and learn for the future. It would also be helpful to clarify what protections there will be for staff, should something go wrong. Is their liability limited as well? I hope that the minister will provide further information as the thinking develops.

Turning to the SNP motion, I genuinely regret that we are again debating constitutional issues and seeking to divide rather than to act. Safe consumption rooms were proposed some six to seven years ago. The law has not changed in that time, but the Lord Advocate has acted in a proportionate—and, in my view, sensible—way to enable a pilot to take place. Why was that not done six to seven years ago?

In September 2021, the Lord Advocate confirmed that there was a legal route to pursuing safe consumption rooms. That was 24 months ago. Why has nothing happened until now? A lot of people feel very let down; they are angry about the lack of action, and about the use of constitutional wrangling as an excuse. All this time, thousands more people have died because of drugs.

In 2021, Nicola Sturgeon apologised for having taken her “eye off the ball”, having declared a public health emergency two years earlier, but I fear that the current Government has, sadly, learned nothing.

**Elena Whitham:** I thank Jackie Baillie for giving way, and for her well-wishing.

I point out that once the new Lord Advocate took up her position, she laid out to the Criminal Justice Committee the parameters by which she would be willing to look at a proposal for a safer consumption facility. The Scottish Government, Police Scotland and Glasgow health and social care partnership then worked solidly for about six months to bring forward a proposal. That proposal went to the Lord Advocate in June 2022, and I thank her for taking the time to come to a decision on it. However, in response to the suggestion that nothing was done in the intervening time, that is simply not the case.

**Jackie Baillie:** I welcome the minister's intervention, but it is clear that nothing has been done for six to seven years. I appreciate the current Lord Advocate's position, but it is the same Scottish Government and the same policy for a safe consumption room, and that policy has simply not been delivered before, so people feel let down.

The law on drugs is exactly the same in England as it is in Scotland—every word and every comma is identical—yet here in Scotland drug deaths are three times higher, so it really is not the law that is the issue. Simplistic arguments about where power rests are simply not credible. We need action from Government, not more distraction in the form of fights with Westminster.

I know that the SNP does not like to hear it, but the powers to end Scotland's drugs crisis lie in St Andrew's house. Those include power over our entire health system, including drug treatment services, mental health services, social care, policing and prisons, to name a few.

Members should not just take my word for it. The former head of the Scottish Drug Deaths Taskforce, Professor Catriona Matheson, has said that

“the Scottish Government needs to focus on what we can do now in Scotland without trying to divert attention to Westminster and the Misuse of Drugs Act.”

David Liddell, former chief executive officer of the Scottish Drugs Forum, told the Scottish Affairs Committee:

“we certainly do have a frustration that the Misuse of Drugs Act is used as a means for delaying responses.”

Finally, anti-poverty campaigner Darren McGarvey has said that we should add

“safe drug consumption rooms to the list of things that were doable in Scotland ages ago.”

Although I welcome the announcement, we must be frank and say that it is clear evidence of how Governments play politics with people's lives. Surely the minister recognises that those experts need to be listened to. How does she respond to

Audit Scotland, which, in its “Drug and Alcohol Services: An update” in 2022, warned of

“a lack of drive and leadership by the Scottish Government”?

I repeat that the powers to end Scotland's drugs crisis lie in St Andrew's house.

We know that we are dealing with a complex and wicked problem. We need to have a clear understanding of the underlying causes of addiction so that we can begin to tackle them at their root; we need action to increase the availability and range of support services and treatment; and we need to recognise that harm reduction, treatment and rehabilitation go hand in hand. The Government is keen to point to the increased amount that it has spent on drugs and alcohol from 2019 onwards. However, it has failed to mention the period before that, when it cut the budget by £46 million. It is astonishing that the Government now wants us to congratulate it simply for restoring its cuts.

This week, I received an email from a general practitioner from the Pollokshaws medical centre in Glasgow, which is just next door to the First Minister's constituency. The GP described the underfunding of primary care and the decreasing budget for treating people with alcohol and drug addictions. The drug misuse national enhanced service is the specific funding stream. It has not grown at all—not at all—in the past 16 years since the SNP came to power. At the same time, we have had a combined rate of inflation of well over 80 per cent, so it has, in effect, suffered a real-terms decrease.

The GP made the point that many addiction teams are attempting to move more stable users to primary care so that they can look after the high-risk cases. However, due to that lack of funding, most general practices are not able to provide the help that is required. The GP notes that if funding is, in effect, halved, care will suffer. He asks whether it is acceptable for that situation to continue. I put that question to the Government. He goes on to say:

“I really think, for the sake of many vulnerable patients and their families whose lives are blighted by drugs misuse, that this would be a positive step towards lowering suffering and deaths.”

The issue is not just primary care services. Other services such as Turning Point in Glasgow are closing their doors to women with addictions because their budgets have been slashed. Local addiction projects in my area have had flat-cash settlements for the past decade, which are, in effect, real-terms cuts in their budgets.

Against that backdrop, I understand that more than £2 million has been identified for the safe consumption room pilot. I ask the minister to say in

her closing remarks whether that will be additional funding or whether cuts are being made to treatment services to allow that to happen. Rehabilitation beds were cut by the Government. Scottish Labour supports Douglas Ross's proposal for a bill that would give people a right to rehab. We recognise that that would not, in and of itself, be a magic bullet, but it is an important provision that would help in the fight to tackle drug misuse, so I hope that the Government will support it.

**Collette Stevenson (East Kilbride) (SNP):** Will the member take an intervention?

**Jackie Baillie:** I am in my final minute.

Since 2007, there have been 13,000 confirmed drug deaths. However, that is not the full story, because the figures do not fully reflect the scale of the problem. The minister's predecessor committed to exploring how the wider range of harms of drugs beyond those where a drug overdose is the cause of death can be recorded. I would be grateful if the minister would update Parliament on that.

It has taken seven years to get to this point with the safe consumption room; I hope that it does not take another seven years before we have drug testing services. It is 14 months since the Scottish Drug Deaths Taskforce reported, yet no formal application has been made to establish drug checking services. It is simply not good enough. We know that such facilities will reduce drug-related harms by allowing people to get substances of concern tested for content and potency. There are also the MAT standards that were promised 18 months ago, which have still not been fully implemented: standards 1 to 5 were supposed to have been implemented by April this year, but that has not happened.

Let me repeat: the powers to end Scotland's drugs crisis lie in St Andrew's house. Stop the distraction, stop the sleight of hand and get on with the job.

I move amendment S6M-10490.3, to leave out from "supports" to end and insert:

"notes that, under the Scottish National Party administration, funding for Alcohol and Drug Partnerships fell by over £46 million in real terms between 2014-15 and 2019-20; welcomes the statement by the Lord Advocate, which will allow a pilot safer drug consumption room in Glasgow to go ahead, but regrets that it has taken almost seven years since the initial proposal for this progress to be made; regrets that more than 4,000 lives have been lost due to drugs since a public health emergency was declared in 2019; is concerned that, 14 months on from the recommendations of the Drug Deaths Taskforce, no formal application has been made to establish drug checking services in Scotland and medication assisted treatment standards are yet to be fully implemented, and calls on the Scottish Government to desist with finding constitutional disagreements and focus on using devolved powers and

resources to improve rehabilitation services and tackle the root causes of addiction."

14:55

**Alex Cole-Hamilton (Edinburgh Western)**

**(LD):** I have great pleasure in speaking for the Liberal Democrats in this important debate.

In 2019, the Scottish Parliament declared drug deaths in Scotland to be a public health emergency. It was the right thing to do. However, since then, over 4,000 people have died in that emergency—there were 1,051 deaths last year alone. Those are sons, daughters, brothers and sisters whose lives and potential have been extinguished far too soon. We are almost desensitised to words of condolence like that, uttered by parliamentarians like me in speeches like this one, but we cannot afford to become inured to the emergency. Each death was a preventable tragedy—we know that because we hear about the tools and how to address the issue in international best practice and in pioneering work. We need to work together to save those lives. I know that I speak for all members when I say that I want the Scottish Government to succeed in doing that.

I am very glad that we are having this debate today and looking at every option on the table to stop people dying. In July, the SNP stated on social media that the drug deaths crisis was worsened by

"a hard and callous approach"

by Westminster. That statement abdicates any responsibility for the decisions that the Scottish Government has taken. We know, and we heard in this debate, that, under the current powers settlement, the Scottish Government slashed budgets for drug and alcohol services by almost a quarter. That is £1.3 million a year for the nation's capital alone. That has severed support and sent to the wall services that people relied on—that, in itself, has turbocharged the problem. We know that, under the current powers settlement, the party of Government chose to look away while the independence referendum unfolded—Kenny MacAskill, the SNP justice secretary at the time, has said as much himself.

The disproportionately bad situation in Scotland is not a product of the devolution settlement, but we cannot ignore the fact that we may need to tailor a particularly Scottish solution to something that has become a particularly Scottish problem. Glasgow has drug death rates that are 10 times those of London. When 100 people a month are still losing their lives, we need to be open to anything that will save them.

I will rest momentarily on the example of Portugal. Sue Webber and I had a brief exchange



about the Portuguese decriminalisation model in which she said that changes in reporting may make the results of that model inaccurate. However, let me tell her that, since decriminalisation in Portugal, we have seen the social impact of drug use fall by 20 per cent, drug-related workloads have decreased and HIV infection due to drug misuse has fallen by 90 per cent. That is an unmitigated success by any measure.

If there are levers in the 50-year-old Misuse of Drugs Act 1971 that might allow a Scottish Government of any stripe to tailor that particularly Scottish solution to stop people dying, then I am open to that discussion, as I have been saying for the past two years. If there were ever an issue on which we should set aside our differences on the constitution and have an adult discussion about the powers that are needed, surely this is it.

**Brian Whittle (South Scotland) (Con):** Alex Cole-Hamilton will remember the debate from March 2021 when the whole chamber voted for a motion that included safe consumption. At the time, we said that we needed to move the debate on. Does he agree that progress has been really slow?

**Alex Cole-Hamilton:** I welcome that intervention, which speaks to the exchange that I had with the minister when I intervened on her speech. So much of this is based on empirical evidence and on waiting for legal clarity, but every year that we do not implement such steps, people die. Over the past decade, my party has led calls to treat the issue as a health crisis and to get people into treatment instead of channelling them into the criminal justice system. We have waited a long time for such action.

I was relieved to read the Lord Advocate's guidance to Police Scotland on safe consumption rooms in Glasgow, which would represent a landmark moment in the fight against this epidemic. That obstacle has been in the Scottish Government's way for far too long.

**Paul Sweeney (Glasgow) (Lab):** Does the member agree that there may be confusion over what constitutes decriminalisation and what constitutes legalisation, and that part of the confusion may be that the law officers of Scotland do not sit in the Scottish Parliament but are quasi-members?

**Alex Cole-Hamilton:** Paul Sweeney makes an exceptionally important point, which is wrapped up in the stigma that shrouds the debate. Taking a genuinely public health approach to the drug deaths emergency somehow equates to being soft on dealers or organised crime gangs. We have to use language carefully and clarify what we are talking about, so I welcome that intervention.

Scottish Liberal Democrats want new specialist family, drug and alcohol commissions to provide wraparound services, because stabilising somebody is all very well but it is very important to identify the reasons for their substance use in the first place. People who are struggling with drug addiction need a range of support, including health and welfare services as well as access to legal support and support in healing from unresolved childhood trauma.

As we have heard from Michael Marra, the Government must also integrate drug-checking facilities into existing treatment services and at events such as festivals, to tackle the rise in dangerous synthetic drugs, which are increasingly in circulation in Scotland and are claiming lives in my constituency in particular.

Work is needed to integrate national health service treatment with support from the third sector organisations that are on the front line and know the ecosystem. It is vital that the Government prepares now to implement a network of safe consumption rooms across the country—it cannot be limited to Glasgow. The pioneering work of people such as Peter Krykant could lend itself to a blueprint that could be rolled out across the country where it is vitally needed. There is a desperate need for such services beyond the west of Scotland.

If we took a walk from this building just a few hundred yards to my constituency, we would see people who are struggling with addiction and at risk who could benefit from such a life-saving facility. The situation in Edinburgh is desperate. Last year, the number of drug deaths in the capital rose by 21 per cent even as the number fell nationally. There is no argument that we need better treatment facilities here and across the country.

To that end, we should commit to providing local authorities with the necessary funding and clarity of guidance to establish those facilities as a matter of urgency. No one should be forced to travel for miles and be, in essence, barred from the treatment that they need by distance.

The Government must make good on a promise made by Nicola Sturgeon in 2021. During a statement in the chamber, the former First Minister promised to

“make additional funding available, starting in this financial year, to make heroin-assisted treatment services more widely accessible across the country.”—[*Official Report*, 20 January 2021; c 29.]

Two and a half years later, there are no additional resources for heroin-assisted treatment across Scotland. Had the Government made good on its promise, how many lives could have been saved?

**The Presiding Officer:** Please conclude, Mr Cole-Hamilton.

**Alex Cole-Hamilton:** I will.

I would be grateful if the minister in her closing remarks informed members of progress on that issue. Our first duty in the Parliament is to protect and support the wellbeing of the people whom we are sent here to serve, but we have failed in that regard. We need to move this agenda on.

**The Presiding Officer:** Before we move to the open debate, I remind members who wish to speak in the debate to press their request-to-speak buttons.

15:03

**Collette Stevenson (East Kilbride) (SNP):** Members know about my personal interest in reducing drug harm and tackling stigma, having lost my brother Brian to a heroin overdose in 2002. Comparing 2021 with 2022, the number of drug-related deaths fell by a record 21 per cent. However, too many people in our communities—our friends, family members and neighbours—continue to be killed due to drug use. The number of deaths is tragic. We must all commit and recommit to doing everything that we can to tackle the issue.

I welcome the Scottish Government's new proposals, outlined in "A Caring, Compassionate and Human Rights Informed Drug Policy for Scotland". Care, compassion and a human rights approach are key to supporting people who use drugs and helping them on their journey to a healthier life—whatever that looks like for them.

Of course, one of the best things that we can do is prevent people from developing problem drug use in the first place. That requires collective action across many areas and in every section of our society. Problem drug use can affect anyone, regardless of where they are from, their class and their wealth. Unfortunately, though, statistics show that people from areas with high levels of poverty and inequality are more likely to die from drug use.

For people who use drugs, it is vital that we tackle stigma, which is a powerful thing that does nothing but compound the problems that people face. Stigma often causes even more suffering and prevents people from getting the help they need, and it can exacerbate already poor mental health. Alarmingly, figures show that around 7 per cent of drug-related deaths are classed as intentional self-poisonings. That figure represents around 73 people who have possibly taken their own life. It does not include people who had an addiction but who used other methods of suicide. For me, that highlights the need to ensure that people who use drugs have access to holistic

person-centred help that considers all a person's needs.

Poverty, imprisonment and difficult childhoods are all things that too many people experience stigma for. When something such as addiction is added into the mix, that stigma can increase, and people can be left feeling worthless. In many cases, people who use drugs have experienced all those things. Health and social care services have a vital role to play in addressing that, and I welcome the £250 million investment in improving treatment options.

Some amazing work is being done in the third sector, too. The Beacons is an organisation that works across South Lanarkshire, offering holistic support to people who have been affected by drugs. I am really happy to say that the Beacons has expanded and now has a recovery hub in East Kilbride. I would like to invite the minister to East Kilbride to learn more about its work to ensure that visible treatment and recovery are embedded in local communities.

Although the number of drug deaths is falling, it is still too high. We must do everything we possibly can to reduce drug-related deaths further, although the number of people dying is just one measure of the issue. Drug-related harms take many forms. We must all recognise that fact, and we must be as committed to reducing harm as we are to supporting measures that stop so many people dying from drugs.

Beyond stigma, other issues—which affect even people who have not used drugs for decades—include diagnoses of diseases such as HIV and hepatitis, which are often caused by sharing needles. Thankfully, nowadays, those conditions can be managed well; however, for some people who have used drugs, they can cause years of poor health. In fact, the Scottish burden of disease study shows that drug-use disorders are the third leading cause of health loss in Scotland, after ischaemic heart disease and Alzheimer's and other dementias.

"We must stop the so-called war on drugs. Instead let us focus on transformative change, crafting drugs policies which are based on evidence".

Those are not my words but the words of Volker Türk, the United Nations High Commissioner for Human Rights. As the Scottish Government has pointed out, the ambition for an evidence-based public health approach is being held back by Westminster's outdated Misuse of Drugs Act 1971.

Short of proper reform, I welcome the Lord Advocate's announcement on drug consumption rooms. That is a positive step forward, as it offers what I believe is a radical tool for tackling drug-related harm. Eliminating the risks of sharing or using dirty needles will go a long way towards

tackling some easily avoidable harms that are caused by drugs and reducing the impact on the national health service of problems that we can eliminate.

There is so much more that I could say on this topic, but I will conclude by saying that I fully support the Scottish Government's motion and actions. We must be radical if we want to tackle the harm that is caused by drugs, and drug law reform is an important tool for achieving that.

15:09

**Russell Findlay (West Scotland) (Con):** I, too, begin by wishing Elena Whitham a quick recovery from Covid.

As every speaker will testify today, Scotland has a deep-rooted, desperate and deadly relationship with substance abuse. Scotland also has a severe problem with organised crime. Those issues are intertwined; they are inseparable. However, the subject of organised crime, and its culpability in relation to our nation's tragic drug death toll, is rarely spoken about in the Parliament.

For reasons that I cannot fathom, the SNP Government rarely shows any sense of urgency in relation to, or even understanding of, the scale and scope of the harm that is inflicted by those parasites—parasites who prey on our most vulnerable people; parasites who use firearms and firebombing to inflict terror; parasites who contaminate society with their dirty money; and parasites who have zero respect for the rule of law or for the sanctity of human life.

Yes, the chronic issue of drug addiction must be treated as a public health emergency, as the Government motion states—members will not get an argument from me or my colleagues on that point. However, as Sue Webber said, the Scottish Government cannot accept the way in which its motion undermines the role of the justice system. It calls for a public health approach, not a criminal justice approach. It is not an either/or situation; it is both—there must be a public health and criminal justice approach.

A robust and well-funded justice system is critical. To think otherwise is not only naive but dangerously so. However, one of the lines that zealots who demand decriminalisation or even legalisation of all dangerous narcotics peddle is that the war on drugs is lost. Like King Canute failing to hold back the tide, they argue that drug trafficking can never be fully eradicated so must, therefore, be tolerated and accommodated.

That is a specious argument—it is glib and immature—and the devastation that that would cause is quite hard to imagine. The message that the societal normalisation of heroin, crack cocaine

and other drugs would send to our young people would be unforgivable. Any politician who argues for what would become a narcotics wild west is mistaken and misguided. They also do a disservice to Police Scotland and the National Crime Agency, which work tirelessly 24/7, 365 days a year, to tackle the gangs who peddle misery and death. Those gangs dupe the media and even some members of the Scottish Parliament by posing as honest businessmen or, worst of all, as anti-drug campaigners.

Scotland's organised crime groups, which number more than 100, are mostly based in the communities that I represent. They are keenly watching the direction that the Scottish Government is taking, and they are rubbing their hands at the SNP's weakening of criminal justice.

Let us look at places elsewhere in the world that now regret the failed experiment of liberalisation, where crime has risen and aggressive drug gangs have flourished, not vanished.

**Paul Sweeney:** The member is correct that organised crime groups are a cancer in our communities and that they should be robustly challenged at every level, structurally. However, does he recognise that interventions such as medication assisted treatment or heroin assisted treatment can, in some instances, be effective in diverting revenues that would otherwise flow to illicit supply chains, giving more control and, ultimately, beneficial outcomes?

**The Deputy Presiding Officer (Liam McArthur):** I can give you the time back for that intervention, Mr Findlay.

**Russell Findlay:** Yes. I am not the only speaker today who will point out the breathtaking brass neck of this Government. SNP ministers declared a public health emergency while inflicting severe cuts to addiction services—shameful. The Government took its “eye off the ball”, as Nicola Sturgeon admitted, while the number of drug deaths more than doubled—shameful. It dithered and delayed on the flow of drug-soaked mail into our drug-infested prisons—shameful. It set up countless talking shops while refusing to back my party's proposed right to addiction recovery bill to give addicts the treatment that they need—shameful. Most shameful of all, it manufactures fights with the UK Government to distract from its own pitiful record.

This Government claimed that UK-wide drug laws prevented it from decriminalising drugs. That is not true. It spent years griping that the UK Government was blocking drug consumption rooms, which was also not true. De facto decriminalisation for drug possession in Scotland has, in fact, long been in place. When the Lord Advocate, standing here in the chamber,

formalised that two years ago, she said that the option to prosecute must remain in place. Dorothy Bain understood the folly of allowing drug dealers to dodge justice by claiming personal possession. I wonder whether the Minister for Drugs and Alcohol Policy can explain why she now thinks that the Lord Advocate is wrong.

Shame on the SNP for using drug deaths as a weapon in its tiresome constitutional obsession. It has been rumbled. It must stop blaming others and stop making excuses. It must start accepting responsibility and taking some action. It should back the right to recovery, stand up to the drug gangs, support our police, listen to Scotland's drug-ravaged communities who are numbed by grief and, please, spare the people of Scotland from an out-of-touch political class that is abjectly failing in its duty of care.

15:16

**Ben Macpherson (Edinburgh Northern and Leith) (SNP):** I am grateful to be able to speak in this important debate about this serious, complex and sensitive issue. It is important that we have time in the Parliament to talk about such issues. Perhaps we have not spent enough time doing so over the past years and decades. We should talk with honesty, without dogma, without a sense of taboo, without stigma and judgment, and based on the facts, so that we can take our policy making and our considerations on the matter, on which there are no easy solutions, into a place where we can make rational decisions, with a philosophical approach and practical implementation that are about harm reduction first—harm reduction first.

The tragedy of deaths and suffering from drugs—a variety of substances come under that term—across Scotland has been too great. The effect on my Edinburgh Northern and Leith constituency over not just recent years but decades is well known. I pay tribute to everyone who works in this area in my constituency, including organisations such as Turning Point Scotland—Jackie Baillie mentioned its work elsewhere in the country, but it also operates in Leith—which does remarkable work, and all the other organisations that are making a difference by reducing drug-related harms, providing support through rehabilitation and treatment services and increasing the availability of naloxone for use when that can make a difference.

The Government's investment of £250 million in the national mission to address our challenges with drugs and provide treatment in Scotland is welcome. Of course, most of the focus has been on what would be known colloquially as harder drugs. Those are the most severe substances of harm in our communities. The minister mentioned street benzos—the damage from which is

significant and growing and should be of concern to us all—the negative effects of opioids and, indeed, the fact that many substances on our streets are now stronger than they were years ago. That is all having a negative effect.

**Brian Whittle:** Mr Macpherson is absolutely right about street benzos. I asked the previous minister about that, and she said that they had risen by some 400 per cent in Scotland, but only by 50 per cent in the rest of the United Kingdom. Does he have any idea why that is?

**Ben Macpherson:** Personally, I do not have any idea why that is, but I agree that, if those facts are correct—I take them in good faith—there should be a public focus on that in our criminal justice system. The demand for treatment and assistance for individuals who are affected by that would, of course, be higher here in Scotland.

**Michael Marra:** On that issue, the reality is that the number of street benzos exploded in this country when Valium scripts were withdrawn in the national health service, which was a policy decision by the SNP Government. I ask the member to reflect on his point given that, in 2013, the drug deaths figures in this country became completely detached from those in the rest of the UK. Policy interventions and measures that were taken by the SNP Government have resulted in deaths.

**The Deputy Presiding Officer:** I can give you time back for both those interventions, Mr Macpherson.

**Ben Macpherson:** I take the member's points, and I am sure that the minister will address those concerns in her response at the end of the debate. I do not think that Mr Marra made that argument in a party-political way; he did it in good faith and in thinking about the welfare of our citizens. However, we all need to focus primarily on the challenge of street benzos that is in front of us now, and the fact is that the Government has brought focus to that in the Parliament. We have a dedicated minister, and the Government is taking action on a variety of issues, including the introduction of safe consumption rooms, which is a policy that we should definitely try, given the positive impact that it has had elsewhere.

Other speakers have used the example of Portugal. Undoubtedly, given that Portugal's approach has made a positive difference, we should look to utilise that in our learning. Every country is different, and we will need to think of our circumstances, but the Government is right to take the approach that it has taken.

The decriminalisation of possession, and possession only, as the Government has proposed, would enable other resources—whether they be police resources or other services—to

better help people in their recovery and rehabilitation and through community support.

The debate is about law reform, and it is absolutely right that we are discussing the Misuse of Drugs Act 1971 in the Parliament, because it has such an effect on many devolved matters. The war on drugs, internationally and domestically, has been a failure. That is because we need solutions that curb the significant harms that are associated with problematic substance abuse and addiction, rather than ones that push the issue underground into the hands of organised crime and create that taboo and stigma.

As we move forward, we need to push the UK Government to reconsider the Misuse of Drugs Act 1971. It is remarkable—many would argue that it is completely perplexing—that the legislation has not been reviewed, given its significance. It is clearly not fit for purpose, it is clearly not working and it is clearly not enabling what we need most of all, which is what I started with—a sense of safety and wellbeing at the heart of all policy decisions. As other members have alluded to, the issue will become more challenging given the developments in biology and synthetic substances. I am worried that, if we do not get on top of the issue, with a rational approach in this country and internationally, the dangers of more potent substances such as fentanyl or others that are now being developed will only become more challenging.

A dogmatic criminal-justice-only approach from the UK Government is completely unfit for purpose. The UK Government should therefore change that law as a matter of urgency. If it is not prepared to do the right thing and make the developments that are required, it should certainly look at devolving powers to this Parliament, where we are taking a harm-reduction approach.

**The Deputy Presiding Officer:** I advise members that we have a bit of time in hand, so anybody taking interventions will certainly get that time back.

15:24

**Paul Sweeney (Glasgow) (Lab):** As I have said on more occasions than I care to remember, Scotland's drug deaths crisis is the most important public health emergency that communities across the country face, bar none. There is no magic bullet—only a fool would suggest that there is. The reality is that it will require a collective approach from every party in the Parliament and a whole-system response that embraces harm-reduction methods and recovery services in equal measure.

I make clear the disdain in which I hold the Government motion. As tends to be the case, the Government has resorted to constitutional

grievance and has called for changes to legislation that are outwith the control of the Parliament before addressing solutions that are possible using the powers that the Government has had at its disposal for years.

There is no clearer example of that contemptuous approach than overdose prevention centres. Almost seven years ago, the then Lord Advocate, James Wolffe KC, rejected the proposal for an overdose prevention centre pilot in Glasgow. Last week, the current Lord Advocate, Dorothy Bain KC, approved it, which proves that—as many of us said—it could be done within current legislative frameworks. In that time, more than 7,000 people have fallen victim to entirely preventable drug-related deaths.

What a horrific indictment that is of the malaise in, and the indifference that is shown by, the Government and people in positions of power. It should not have taken people such as Peter Krykant risking their livelihoods and liberty to prove that overdose prevention could be done on the streets of Glasgow. That is the job of the Government—a job at which, by all accounts, it has failed miserably. Today, when we could have had a debate about how to progress the introduction of an overdose prevention centre pilot in Glasgow—a measure that, belated as it would be, every party in the Parliament supports—we are reduced to the dismaying spectacle of the Government squabbling over the constitution.

In the back of the old converted ambulance that is run by Peter Krykant, I have worked with people who were trapped in the vicious cycle of poverty, trauma and addiction. They do not care for the political games that are often played with their lives and the lives of their loved ones. They do not care whether Governments at Calton Hill or Whitehall hold specific powers. Most worryingly, they perceive those of us in positions of power as being aloof and devoid of compassion or empathy for the plight that they endure, and they fear that we are more interested in point scoring than in addressing the root causes of the problem.

Based on the evidence of the past few years, and from what we have heard so far in the debate, who could blame them for holding those cynical views? As I said previously, harm reduction and recovery do not exist in individual silos. We cannot rehabilitate a corpse and we cannot expect harm-reduction methods to work without long-term wraparound recovery and addiction services.

The harsh reality is that the Government has taken its “eye off the ball”. Those are not my words, but those of the former First Minister. In consequence, we have seen an almost continuous spiral of death and devastation in some of the poorest communities in our country. People who try to access recovery services are failed by a

flailing approach to the introduction of medication assisted treatment standards, which has been woefully inadequate, in part because almost £50 million was slashed from alcohol and drug partnerships' budgets between 2014 and 2019.

**Brian Whittle:** Paul Sweeney knows that we all agree that we need to take a health approach to addiction, but surely part of that has to be that, when people seek help, there must be somewhere to which we can send them. That is one of the big issues that we have.

**Paul Sweeney:** I completely agree with the point that Brian Whittle makes. One of the most important points about overdose prevention is the interaction with people who are deeply alienated from other services. The first conversation could be the difference between life and death. We see that in all sorts of interactions with vulnerable people in society.

The Government has the opportunity to enhance diamorphine-assisted treatment, for example. We have seen no progression beyond the initial heroin-assisted treatment pilot in Glasgow. The Government has simply not addressed that measure robustly enough, which could save lives. Brian Whittle made an important point in that regard.

All the while, the Government's answer is to cry out for more powers, when every power and policy that it has at its disposal is underused, underfunded or utterly underwhelming. I support a public health approach being taken to solving the drug deaths crisis in our communities. I also support harm-reduction measures and any effort to get people into recovery and rehabilitation, should they wish to do so. However, I cannot support the Government's continued denial of reality and its persistence in playing politics with people's lives.

Countless people have made more impact in the fight to solve this country's drug deaths than the Scottish ministers. I genuinely have nothing but admiration for every one of the citizens who stepped forward when the Government did not. They are the real heroes. They are the best of us and they showed leadership and courage when the Government was in hiding.

I encourage all colleagues to support the amendment in the name of my friend, the member for Dumbarton.

15:30

**John Mason (Glasgow Shettleston) (SNP):** Thank you for the opportunity to speak today, Presiding Officer.

First, I will say that I am pretty much in complete agreement with the motion that is before us today.

Every life that is lost to drugs is a tragedy. Often, if not in every case, there will be a whole personal story behind a person's being addicted to drugs. That story might have started with financial or relationship problems, then gone on to alcohol abuse, then on to softer drugs and finally to harder drugs, which too often leads to a tragic death.

So, is every drug death avoidable? I do not know. If someone were to intervene at one of the earlier stages or even during the last stage, then hopefully the end could be different. However, I fear that some individuals are on such a path to self-destruction that it is almost impossible to break into the cycle. I had a friend who was like that with alcohol—he got a huge amount of support, but in the end he destroyed himself. So, of course we need to do all that we can to help and to improve things, but we should never completely forget about individual responsibility.

The number of drug deaths in 2022 was 1,051. We absolutely want to reduce that. However, it is worth noting at the same time that the number of deaths related to alcohol was higher, at 1,276.

On the matter of a pilot of a safer drug consumption room, which it is widely expected will be in my constituency, I am positive about that. Clearly, anything like the pilot, which will give more support and reduce the number of deaths, is to be welcomed. I hope that there would also be a range of other services available on site, so that the underlying and associated problems—debt, homelessness, mental health or whatever—could also be tackled.

At the same time, there are some questions to be addressed. The first is whether the users of the room will still be expected to buy their drugs illegally. It strikes me as slightly odd that we are to treat drug use as a health matter, but the drugs in question are still to be supplied by organised criminal gangs. What other part of the health service requires patients to buy their drugs in that way?

Heroin-assisted treatment or medically assisted treatment strike me as better options, where they are possible, with the required drugs also being supplied by the health centre. Let us remember that not all the deaths around drugs are suffered by the people who are consuming the drugs. We have had, in the east end of Glasgow, various shootings and murders over the years, linked to criminal gangs, which we understand are in turn linked to supply of drugs. So, as long as supplying the drugs remains in criminal hands, I fear that we will continue to experience such violence and death.

**Paul Sweeney:** I thank John Mason for giving way. He will be aware of the heroin-assisted treatment pilot, which I think is in his constituency

in Glasgow. Does he not share my frustration that the pilot is vanishingly small in scale and could easily be expanded and grown to help to address some of the issues that he referred to, such as the monopoly of criminal gangs in the supply chain?

**John Mason:** I agree with the first half of what Paul Sweeney said, but maybe not the second half. He said that the pilot “could easily be expanded.” I raised that before—although I cannot remember whether it was with the current minister or the previous minister. I accept that there are challenges in doing that, so it will not be available to everybody, but I would like to see the pilot being expanded in due course. We have to treat each person separately, so such treatment might not be suitable for absolutely everybody.

We also know that people who need drugs might steal, supply others or force partners into selling sex in order to fund their habit.

At the more local level, we already have a fair amount of dealing and using around Hunter Street, Bell Street, and East Campbell Street—which, for those who are less familiar with the area than I am, are streets just north of the Barras. Over the years, I have had various issues that are linked to drugs raised with me by local businesses and local residents. For example, a supermarket had to remove its advertising boards because drugs were being hidden inside them, a shop for young families has had people running through with blood running down their arms and similar, and residents find needles and drug paraphernalia in their closes and back courts.

I hope that that situation will be helped somewhat by the consumption room, but will it also attract dealers and users to the area? Previously, the police have raised the question of how they are to treat people who are carrying drugs and are travelling from the place of purchase to a consumption room. I assume that that is being dealt at a higher level, through appropriate guidance.

Finally, I am broadly pleased that possession of drugs in the facility will not lead to prosecution, and that the UK Government appears not to be challenging that point; however, the way in which that is happening raises a slight concern in my mind, in that it seems to be the case that the Lord Advocate is actually making new law, which is not normally her role. It should be for Parliament—either us or Westminster—to make the law. We see real struggles at the moment in countries such as the United States and Israel over whether the courts or elected representatives make the law. Although I am relaxed on this occasion about Dorothy Bain’s intervention, I would not want it to become a regular occurrence for parliamentarians and the existing law to be overruled.

On the Conservative amendment’s plan for a right to recovery bill, I wonder whether we have costings. How much money is it expected to cost and where will that money come from?

To finish on a positive note, I say that people who use drugs and other substances can be helped in a variety of ways. For some, it will be through gradual reduction in safe consumption rooms or elsewhere. For others, it can be through abstinence or a quicker break. Along from my office at Parkhead was the base of Calton Athletic Recovery Group, which was a tremendous project that a guy called David Bryce founded. His emphasis was on getting younger guys with addiction issues into sport. It certainly seemed to work for a number of individuals.

The other week during time for reflection, we heard from Alasdair Bennett of Bethany Christian Trust here in Edinburgh. He told of

“a young man called Scott, who ... grew up near Leith ... He fell into a bad rut and lost his way, making some big mistakes and damaging his mind through a cocktail of substance abuse ... By the age of 19, ... vice-like paranoia gripped his mind.”

Alasdair told us that

“someone was praying for Scott: his mother”,

and that eventually,

“his life was turned around ... and his mind was healed.”—  
[*Official Report*, 5 September 2023; c 1.]

He also told us that that young man was himself, and he reminded us that “change is possible.” Cycles of addiction can be broken.

**The Deputy Presiding Officer:** I call Gillian Mackay, who joins us remotely, for around six minutes.

15:38

**Gillian Mackay (Central Scotland) (Green):** Before I begin, Deputy Presiding Officer, I apologise for not being in the chamber this afternoon as I, too, am ill. I invite Sue Webber to apologise for her insensitive and incorrect comments earlier, when she said that the Greens have not even bothered to turn up. I am more than happy to take an intervention if she would like to correct the record or apologise but, if she does not, I will move on.

As many others have done, I offer my condolences to everyone who has lost a loved one to drugs and pay tribute to those organisations and individuals who have campaigned tirelessly for drug law reform. I also want to thank those who have provided briefings for today’s debate.

The Scottish Greens have long called for a public health approach to drug-related deaths. We need to offer support and not judgment,

compassion and not punishment. Punishing people for their addiction simply does not work but serves to further entrench stigma and prevents people from seeking help. As others have mentioned, 1,051 people died in 2022 due to drug-related causes—that is 1,051 preventable deaths, 1,051 grieving families and 1,051 devastated communities.

Although any reduction in deaths is welcome, we still have so far to go. We need to be using every tool in our arsenal to reduce harm and prevent further loss of life. Any harm reduction strategy must include safe consumption rooms and I am pleased to see the progress that is being made on that point, including the Lord Advocate's statement last week. It has not come a moment too soon, however. Safe consumption rooms have been operating in Europe for around 30 years and we know that they reduce the risk of overdose and can put people who use drugs in touch with services that can help them. They also reduce the risk of disease transmission and the prevalence of discarded needles. Their introduction is long overdue.

When it comes to reducing the number of drug-related deaths, we must follow the evidence. However, too often, outdated legislation that aims to criminalise people for their drug use blocks progress. The Misuse of Drugs Act 1971 is hugely outdated. As we know, this past month, the House of Commons Home Affairs Committee published a report that concluded that the Misuse of Drugs Act 1971 and the Misuse of Drugs Regulations 2001 need to be updated to support greater use of public-health-based drug interventions. The evidence is stacking up and more and more voices, including the Royal College of Physicians, the Global Commission on Drug Policy and the Law Enforcement Action Partnership UK, among many, are calling for the legislation to be updated.

I whole-heartedly agree with the motion when it says that the

“Scottish Government should work constructively with the UK Government”

on this, or that the powers to do so should be devolved. Scotland needs drug legislation that is fit for the 21st century and has human rights at its heart. Introducing new legislation will have many benefits, not least allowing the roll-out of safer consumption rooms across Scotland. It will also facilitate the roll-out of other important public health measures, such as heroin-assisted treatment and drug testing.

Scotland has already made progress on heroin-assisted treatment. We have already heard that the Home Office has allowed a dedicated service to operate in Glasgow. The Scottish Drugs Forum has already reported impressive early results from

that programme and Scottish Greens fully support the opening of facilities in other parts of Scotland where people could benefit.

We must see drug checking progressing at pace to ensure that people are not injecting drugs that are cut with substances such as cement. Checking would also allow people to know the strength of what they are injecting, which by itself would save lives.

I turn to focus on stigma, which kills. It prevents people from seeking treatment and means that they are seldom met with the kindness and compassion that they deserve when they do ask for help. Media narratives, or the words of those in this chamber, too often focus on personal or lifestyle choices and demonise people who use drugs. Those narratives ignore the fact that Scotland's high level of drug use is rooted in the harsh climate of de-industrialisation during the 1980s that devastated communities across the country.

Drug use is often inextricably linked with issues such as poverty, multigenerational trauma and poor mental health. Most high-risk drug users come from already marginalised communities. Despite that, the Scottish Drug Deaths Taskforce said that people who come into contact with services are often reduced to being a “drug problem” when they need a person-centred system that recognises their multiple and complex needs and the various ways in which they are stigmatised and marginalised and that does not reduce them to categories or labels. I have long advocated for stigma training for all those who work in front-line services and think that it should be extended to MSPs.

A first step in building a better and more caring system would be to ensure that it is underpinned by good quality legislation, based on the principle that people who use drugs are individuals who deserve to have their needs met. New drugs legislation will help to tackle stigma.

As I said at the beginning of my speech, drug-related deaths should be treated as a public health issue, not a criminal one. The Greens therefore believe that drug use should ultimately be decriminalised and we will always call on the UK Government to engage constructively on the issue. In the absence of any action from Westminster, powers must be devolved to Scotland so that we can create a society in which no one is criminalised, stigmatised, marginalised or demonised for their drug use.

**The Deputy Presiding Officer:** I remind members that those who are participating in a debate should be here for the opening and closing speeches and that anyone who has made a speech is expected to remain here for at least two



speeches after their own. A couple of members have fallen short of that, so I give that useful reminder.

15:43

**Bill Kidd (Glasgow Anniesland) (SNP):** I feel that there is much agreement across the chamber today, in that there is a shared recognition of the need for drug law reform. I welcome the Scottish Labour party's support in its amendment for

"a pilot safer drug consumption room in Glasgow"

and I agree with Labour's regret that it has taken so long since the initial proposal was made to get to this point. It is, however, worth remembering that, until recently, the UK Government opposed the introduction of safer consumption rooms at every turn. When the issue was debated in Westminster Hall, my SNP colleague Ronnie Cowan MP called on the UK Government to look at the growing body of evidence and to change the law to allow drug consumption rooms to be opened in the UK without fear of prosecution. Victoria Atkins, then a parliamentary undersecretary at the UK Home Office said in reply:

"To be very clear from the start, the Government do not agree with the hon. Gentleman's suggestion. We have no intention of introducing drug consumption rooms, nor do we have any intention of devolving the United Kingdom policy on drug classification and the way in which we deal with prohibited drugs to Scotland"—[*Official Report, House of Commons*, 20 January 2018, Vol 634, c 390WH.]

Following that debate, David Liddell, chief executive officer of the Scottish Drugs Forum, said that that was a

"clear indication that the current UK Government is not willing to engage in a potentially life-saving and, significantly, evidence-based approach, which would provide another tool in attempting to combat the increasing numbers of drug-related deaths and drug-related infections."

**Michael Marra:** I agree with the member that it is a good thing that we have reached this point. However, perhaps he could tell us what he wants to do now that would require the devolution of further powers. What policy does he want to implement that he is being prevented from implementing?

**Bill Kidd:** I am coming to that, so I will try to cover it.

The last-minute about-turn by the UK Government and the Scottish secretary's less than substantially supportive statement that it will not intervene are, of course, welcome. I support the sentiment that the Scottish Government should

"prepare now for a network of safer consumption facilities so that there is no delay in making these lifesaving services available around the country."

We have to look at what has been said at Westminster. I believe that the Scottish Government should be working in a spirit of co-operation and I hope that Westminster will do so, too. I am keen to hear from the minister how the Scottish Government intends to approach the national roll-out of such facilities. However, as I have said previously, I must disagree with the assertion that where we find ourselves is, as has been stated,

"not the product of a deficiency of devolution".

It is precisely because of the deficiencies in devolution that we have been unable to take such an approach to reforming drugs law here in Scotland. We have been unable to do that not only because drugs law is reserved but, more pertinently and importantly, because of a lack of willingness on the part of the UK Government to work with the Scottish Government. Sadly, we see that approach time and again. However, I believe that that might possibly be able to change. I am certainly hopeful.

I turn to the Scottish Conservative Party's amendment. Again, it contains much that I can agree with, but I cannot support it in its entirety. To dismiss consideration of decriminalisation out of hand is pretty much a knee-jerk reaction and one that is not entirely helpful to the overall debate. Instead, I support a more measured approach to the issue, as stated in the Government's motion, which

"supports the calls for an urgent review of the Misuse of Drugs Act 1971 to fully align the law with the public health response outlined in the Scottish Government paper, *A Caring, Compassionate and Human Rights Informed Drug Policy for Scotland*, of which decriminalising drugs for personal use is one part".

I feel that such a mature and reflective approach is the way forward. Rather than simply opposing something for the sake of it, we must explore all options that are available to us in tackling drug misuse in Scotland.

I do not want to go too far off beam, but the truth of the matter is that, as other members have mentioned, we have to remember how much of a failure the prohibition of alcohol was in America. I remember that, when I was a boy, there was something called stairheid dynamite. People made it in their closes and sold it because the stuff in the pubs was considered too expensive for some people. If the stuff is considered too expensive, that is because people cannot afford it, but possibly it is also because it is too dangerous. We need to ensure that there is an opportunity for people to receive their drug rehabilitation from Government sources, such as pharmacies that are allowed to provide it, or from drug consumption centres, rather than buying drugs from criminals out on the street.

Taking all that into consideration, and for the reasons that I have pointed out, I will not support the amendments to the Scottish Government's motion. I ask everyone to give their whole-hearted support to the motion.

16:49

**Brian Whittle (South Scotland) (Con):** I wanted to listen to others across the chamber this afternoon. What I have found is that many of the same people have been speaking on the issue for the seven years that I have been here, and there have consistently been calls for the Scottish Government to take action on a crisis that has been growing for many years. In the debates that we have had on the subject, the arguments have been rehearsed repeatedly, but the Scottish Government has never managed to answer the following question, which has been put to it continually: why is Scotland so much worse in this regard than everywhere else?

Linked to that is the question of why Scotland has a higher death rate among the homeless community. How can anyone deliver a solution to a problem that they do not understand? During a question session with the Health and Sport Committee, Angela Constance, the previous Minister for Drugs Policy, said herself that it will require the deployment of resource from both the health and education portfolios to effectively tackle this crisis. She is absolutely correct. Both of those portfolios are totally devolved to the Scottish Government.

**Audrey Nicoll (Aberdeen South and North Kincardine) (SNP):** Is the member aware of the cross-committee work in the Scottish Parliament that involves the Criminal Justice Committee, Social Justice and Social Security Committee and Health, Social Care and Sport Committee? Together, we are looking at how we support the work around tackling drug harm and reducing drugs deaths in Scotland.

**Brian Whittle:** I thank the member for her intervention. I will come on to talk about the fact that we should be working not only across portfolios but with Westminster, as we did in the previous parliamentary session, so I hope that that will answer the member's question then.

I want to get on to what we could be doing and what we should have been doing. For years, the Scottish Conservatives have called for the reintroduction of rehabilitation beds, after the SNP Government decimated the previously available numbers of those. Only now is the Scottish Government reversing those cuts. I would like to see an increase in needle exchange programmes to tackle HIV and hepatitis C and reverse the

upward trend that, again, followed a cut in those programmes.

How do we deal with reoffending in our jail system? How do we put support into prisons where too many become addicted to these drugs, and how do we link people with that support once they leave prison? That leads me to a point about the third sector, which I have championed for many years in the Parliament. The third sector is crucial in tackling the drugs deaths crisis, and we must ensure that it is properly funded. I do not know about other members, but every third sector organisation that I talk to about this issue is struggling with funding, and they are the people who reach the most disenfranchised people in our communities.

I have been interested in the link between deprivation and addiction. Turning to Audrey Nicoll's point, along with colleagues from the Health and Sport Committee, I joined the Westminster Scottish Affairs Committee investigation into Scotland's drug problem. Its report said that deprivation itself does not directly cause addiction. The links between poverty and drug misuse are complex. The main mechanisms that are described as credible links between deprivation and problem drug use are weak family bonds; physical discomfort and personal distress, including ACEs and long-term distress—I must say that the link between adverse childhood experiences and drug misuse is quite remarkable—low employment opportunities and few community resources.

When someone has a drug problem, they also have limited means to escape poverty. The chances of obtaining paid employment are also much reduced. Having a criminal record, a lack of an employment history and the stigma of having or having had a substance misuse problem will all play a part in that.

Therefore, it stands to reason that the resource should be allocated prior to addiction. That must be the most cost-effective investment. Simply put, if there are fewer community resources in those areas, for goodness' sake develop those resources to fit those communities. Long-term policy on prevention is required, and that is never brought up in these debates. It is about access to opportunities to participate in our communities, to be part of something—the chance to be passionate about something in a group of people who have the same passions. We need to ensure easy access to those services. One thing is for sure: if we do not give our children a gang to belong to, they will find their own gang, and I am afraid to say that decriminalisation of drugs does nothing to address that issue.

I have the greatest respect for Elena Whitham and her knowledge of the issue, not to mention her

commitment to tackling the crisis. However, I must ask why it has taken the Scottish Government so long to act.

Earlier, during my intervention on Alex Cole-Hamilton, I referred to a debate in March 2021 on a motion that the whole Parliament voted for because we needed to move the debate on. We continue to be concerned about safe consumption rooms. My concern is what other solutions will have to be ditched if we spend the money on consumption rooms. The current Government motion mirrors the motion from 2021. There is a new set of MSPs, and the reset button has been hit once again.

What progress have we made in the past two and a half years? The situation reminds me of something that was said about those on the front line:

“you keep talking, we keep dying.”

All the while, there are those in our society who are the most marginalised, whose voices are seldom heard and who desperately need our help, but who are continually overlooked and let down by this place. Quite frankly, that is this Parliament's shame and, more specifically, the shame of the SNP Government, whose actions have been too little and too late.

The minister has the support of the whole Parliament to get the crisis under some kind of control, and I ask that she and her Government depoliticise the issue, get rid of the constitutional argument and recognise that they have all the powers that they need to deliver a solution. The Government should look at the Conservatives' proposed right to recovery bill and implement a more rounded approach. The problem will not be solved by the odd safe consumption room and certainly not by the decriminalisation of drugs. Education and health policy are the real battlegrounds, where the real hard yards will have to be made. I say to the Government: please do not be afraid of making difficult long-term decisions, because that is the only way to deal with this crisis.

When we look back at some of the debates that have taken place just in my time here, we see that precious little has changed—and it needs to.

15:56

**Jackie Dunbar (Aberdeen Donside) (SNP):** I wish the minister and Gillian Mackay a speedy recovery and thank them for leaving their sick beds to take part in the debate.

I have said it before in this chamber, and I will say it again: every drug death is a tragedy. Every statistic represents not just a person but grieving friends, families and communities. The high levels

of drug deaths that we face year on year in the UK and Scotland show that the current approach is just not working, so I and many others welcome the evidence-based proposals for change and reform.

If we are to address the root cause of the drug deaths tragedy, we need to tackle stigma and dehumanisation. The stigmatisation of drug misuse means that we often dehumanise the folks involved, and we simply cannot allow that if we are to see serious, positive change. They are real folks with real friends and families, and they are among my constituents, your constituents, Presiding Officer, and all of our constituents. If we want to create a society where drug misuse is treated as a health issue and not a criminal matter, we must actively unlearn dehumanisation and remove it from our work, as we know that it has tragic consequences. We must create a supportive environment, where users can reach out for help and know that they will receive it without judgment or discrimination, and where we work to identify and remove social, cultural and economic barriers to help.

We are taking a significant step on that journey through approaching the problem as a public health emergency. Ultimately, substance dependency is a health condition and, when it takes root in our communities, it should be dealt with first and foremost as an avoidable public health emergency, not just as a regrettable uptick in criminal activity. I was heartened to see that principle at the heart of the Scottish Government's motion, and it is hugely reassuring to see it right there in the title of the policy paper itself: “A Caring, Compassionate and Human Rights Informed Drug Policy for Scotland”. The more we embed compassion into our approach to the emergency and the more awareness we spread of the human right to a happy, healthy life, the more folk with a dependency on drugs will be able to seek the caring and often life-saving support to which they are entitled.

Of course, it is not just enough to be kind and hope for the best, which is why the policy paper contains bold ideas, as well as building on the policies and investment that are already in place. The £250-million national mission on drugs must continue to gain momentum, ensuring that the right treatment is reaching the right people. Residential rehabilitation must be accessible, life-saving medical technology standards must be delivered, and the effort to tackle interconnected issues of social justice and inequality must continue.

Those who live in the most deprived areas of Scotland are almost 16 times more likely to die from drug misuse, so I welcome, and wholeheartedly applaud, the First Minister's laser focus

on eradicating poverty in the year ahead. More is needed, however, and the Scottish Government's policy shows a promising route forward.

The policy proposal that has captured the most headlines argues for the decriminalisation of possession for personal supply. It is seen as radical, but less radical than it may once have been viewed. We have evidence of the effectiveness of such policies not just in projections and theories, but in reality. For proof, we need only look to Portugal, which introduced a similar policy in 2001—a policy that remains in place to this day. Like us today, those in Portugal recognised that the fight had to be against the health problem, not the patients.

The Scottish Government's paper states its support for safer drug consumption rooms, noting that as of 2022, 16 countries are successfully operating legal drug consumption rooms. The recent announcement by the Lord Advocate will have been welcome news to many who are keen to see progress in that regard.

As long as care, compassion and human rights are at the core of the Scottish Government's approach, I have hope that we can turn the tide, saving lives and improving folks' wellbeing. It is harder to maintain that hope, however, when I look at the UK Government's approach. While we in Scotland turn to care, compassion and human rights, the Home Office claims to be swift, certain and tough—words used in the title of a UK Government paper just last year. Such language is entirely outdated, dehumanising and stigmatising, and it is a hangover from the impossible war on drugs—a war that cannot be won, and which we cannot keep fighting.

The reserved Misuse of Drugs Act 1971 is now more than 50 years old. It is in urgent need of reform, and it is not just here in the Scottish Parliament that that is recognised. Experts on the Scottish Drug Deaths Taskforce have come to the same conclusion, as have Westminster's Scottish Affairs Committee and Health and Social Care Committee. Only by amending the Misuse of Drugs Act 1971 or devolving the powers to implement Scotland's drugs policy can we reach the end goal: saving lives, preventing harm and removing needless stigma.

The changes that are outlined in the Scottish Government's proposals, while they are ambitious and radical, are necessary. As has been said many times on all sides of, and outwith, the chamber, we are facing an emergency. In the face of crisis, we should use every lever at our disposal—in this case, some of those levers currently lie with the UK Government. My hope is that the talks ahead are constructive and positive, and that care and compassion guide our national mission to end drug deaths for good.

16:02

**Michael Marra (North East Scotland) (Lab):**

This is a moment when years of excuses, obfuscation and prevarication should finally come to an end. The Lord Advocate's statement, which means that a trial of safe consumption rooms in Scotland can now proceed, is long overdue and long predicted. Significant legal voices have been saying for years that there is no barrier in law to a competent proposal of that kind proceeding, and that the question was one of Scottish Government competence and political will. It should never have taken this long.

In 2017, the then Lord Advocate ruled against an incompetent proposal from this Government, which has, in the years since, indulged in constitutional grievances in an attempt to shift the blame.

In 2018, the then Minister for Public Health, Sport and Wellbeing, Joe FitzPatrick MSP, described safe consumption rooms as

“a policy that will save lives”—[*Official Report*, 28 November 2018; c 71.]

but claimed that it was Westminster that prevented them from being tested in Scotland. The SNP Government proclaimed itself “powerless to act”. In November 2019, Mr FitzPatrick said:

“I just do not understand how the UK Government ... can stand in the way of saving lives.” —[*Official Report*, 5 November 2019; c 4.]

How many of the 296 recorded drug deaths in Dundee from 2017 until now could be avoided if action had been taken by ministers in the Scottish Government?

The most recent UK-wide data shows that, in 2021, Scottish drug deaths were almost three times higher than the UK average. That is a deeply inconvenient truth for this Government, which has admitted to taking its “eye off the ball”. It is a truth that should have given ministers pause before lodging motions such as the one that is in front of us today, which has been rightly criticised by my colleagues Jackie Baillie and Paul Sweeney.

That really matters, because admitting to gross failures in this Government's policy agenda can help Scotland to avoid such mistakes again. There has never been any answer from the Government—as I highlighted to Ben Macpherson—on who approved the policy that Valium scripts be withdrawn back in 2014, seeding a market in illicit benzodiazepines, which have been implicated in thousands of lost lives in Scotland.

Policy failure in that area—

**Maree Todd:** For the record, the decision to stop prescribing benzodiazepines in Scotland was

not taken by any Government; it was a clinical one, based on research that showed a risk of harm from prescribing them. Crucially, that was a UK-wide trend; it was not just a Scottish thing. The Scottish Government will publish the results of its recent consultation on prescribing benzodiazepines, which will include guidelines on safe prescribing. That publication is scheduled for later this year.

I repeat that I wanted to place that on the record, because a couple of interventions have misinformed on the issue.

**The Deputy Presiding Officer:** I can give you the time back, Mr Marra.

**Michael Marra:** I have to say that, time and again, in the chamber and elsewhere, I have asked for an explanation of the process, but it has never been forthcoming. Perhaps minutes of the prescribing decision that was taken across the whole country could be provided. It was a national approach rather than an individual one taken by clinicians. I would appreciate it if that information could be published, if it is in front of you now, so that parliamentarians could see the basis of the decision that was taken.

**Brian Whittle** *rose*—

**Michael Marra:** No, thank you, sir.

It was clearly a decision that has resulted in thousands of lives being lost in this country. There have been perverse consequences from it.

**Maree Todd:** I can certainly attempt to furnish you with that information, but I can assure you—

**The Deputy Presiding Officer:** Please speak through the chair.

**Maree Todd:** I can certainly attempt to furnish the member with that information. I do not think that the Government took a decision to reduce benzodiazepine prescribing in Scotland in particular. Members will be aware that I am a registered pharmacist and that I have specialised in the mental health area for 20 years. As such, I can assure the member that there is a body of evidence that shows the clinical challenges that are associated with prescribing benzodiazepines. I think that the member is misleading the chamber by trying to imply that the situation is peculiar to Scotland; it raises concern throughout the world.

**Michael Marra:** If I could have the time back, Presiding Officer, I would greatly appreciate it.

**The Deputy Presiding Officer:** You certainly will have it.

**Michael Marra:** The drug deaths figures that have been released since then show a complete departure from the UK and Scottish patterns. The toxicology reports that are ascribed to those

deaths show a massive increase in consumption of gabapentin, etizolam and illicit street drugs as a result of those scripts being withdrawn.

I will be happy to engage with the minister on this point in the future. Frankly, this is the most engaged that I have seen a Government minister being on the matter, which I have been raising for two and a half years, so I would welcome further dialogue on it.

It is essential that we learn where mistakes have been made. This has been a grotesque mistake that has resulted in deaths, and the figures prove that to be the case. Policy failures in this area are measured in deaths—there is no doubt about that. The Government must now set aside the default constitutional arguments and set out, clearly and fully, when the MAT standards will be met. That commitment is now 18 months overdue. When will they be fully implemented? Can the minister provide guarantees that the safe consumption pilot in Glasgow will be fully funded and that the budget disaster in Glasgow's health and social care partnership will not affect that? Will it include research to prove the direct and indirect impacts of the intervention so that people can have confidence in any potential roll-out? What progress is being made on the drug-checking pilot that has been proposed for Dundee? I have had a promise on that from Ms Whitham today, which is welcome, but we must ensure that we can build on health messaging and the development of accurate data.

I remain deeply concerned following last week's statement and the Government speeches in this debate. The Government still does not have a firm grasp of what is going on behind the top-line statistics. The drop in the number of drug deaths during 2022 was welcome, but does the Government know why it has happened?

Last week in the chamber, I raised with ministers reports that I have been hearing from drug workers and campaigners in Dundee of a significant rise in the use of crack cocaine. The impacts of that drug on people's behaviours, on their relationships and on wider communities are severe and destabilising. The minister told me that

"services in Dundee will have to pivot"—[*Official Report*, 12 September 2023; c 23.]

to meet the new challenges presented by changes in drug use.

However, the complete failure of service reform in my home city has been the subject of multiple damning reports and has led to the resignation of the independent chair of the alcohol and drug partnership. The last decade of inertia and blame shifting does not give me any confidence that the systems that we have are agile, dynamic and ready to respond—very far from it. I am grateful to

the minister for offering to meet me to discuss the issue in greater depth. I hope that the minister can commit to publishing any information that the Government has on the trends in drug use in Dundee and across Scotland. That data is crucial in ensuring that the months and years ahead are not yet more wasted time—time that the people of Dundee simply cannot afford to lose and that we, as their representatives in Parliament, must not allow to be squandered.

16:10

**Audrey Nicoll (Aberdeen South and North Kincardine) (SNP):** I echo the comments that have been made by colleagues this afternoon: every life lost to drug use is a tragedy for the loved ones, friends and communities that are left behind.

I welcome the opportunity to speak in today's debate in support of the Government motion that recognises the scale of the job in hand to reduce drug harm, how our approach in Scotland is being developed and what more is required. I thank the organisations that submitted briefings ahead of the debate.

No one is in any doubt whatsoever that, despite the overall reduction in deaths recorded as drug related, the scale of the challenge to meaningfully address drug harm is long term, complex and cross-cutting. Chronic and multiple complex disadvantage, poor physical and mental health, unstable housing and family breakdown can predispose people to high-risk drug use. Deprivation, the ageing population of people who use or have used drugs, and the risky behaviours of some people who use drugs are all complex issues in their own right, never mind trying to address them collectively across communities, sectors and organisations.

In recent years, the suite of measures that have been launched to tackle the drug deaths crisis in Scotland deriving from the work of the Scottish Drug Deaths Taskforce has gained traction. There are two basic principles that underpin that work: first, that drug-related deaths are preventable—we have heard much about that in the chamber this afternoon; and secondly, that the Scottish Government must focus on what can be done within our powers.

The national mission has underpinned much of the work across Scotland to support better access to treatment, improve front-line drug services and increase access to residential rehabilitation. I am particularly pleased to note the increased funding to community and grass-roots organisations, and the fact that practice involving work with families has developed further—Brian Whittle made that point. That front-facing work sits at the heart of how we make life better for families and

individuals impacted by drug harm. As Michael Marra suggested, that work is also very important in providing eyes and ears on changing patterns of drug use.

I know from engagement with colleagues supporting the delivery of drug services in the north-east that, although the national mission has been welcomed, the wider issue of funding arrangements risks impacting on the effectiveness of workforce planning. Given that we all must be invested in maintaining the momentum of the work, I would be keen to engage further with the minister on that particular point.

I welcome the recent Scottish Government paper “A caring, compassionate and human rights informed drug policy for Scotland”, which members have alluded to this afternoon. It sets out a new way of developing our drugs laws based on evidence and informed by those living with drug harm and those working to alleviate drug harm. That relates to the Parliament's cross-committee work on tackling drug harm and reducing drugs deaths. That work followed on from an evidence session that the Criminal Justice Committee held with people with lived experience of drug use, who told us very clearly that they wanted to see a cross-sector approach to tackling the issue.

In response to that, members of the Criminal Justice Committee, the Health, Social Care and Sport Committee and the Social Justice and Social Security Committee agreed to meet jointly. Our remit is to consider the implementation of the recommendations of the Scottish Drug Deaths Taskforce. I know that the minister was involved in the early stages of that work when she was convener of the Social Justice and Social Security Committee. That approach reflects the need to consider aspects of the criminal justice system, health policies and wider social and economic matters such as poverty, unemployment, unstable housing and family breakdown, which we have discussed in the chamber. Members have met jointly four times since February 2022.

**Sue Webber:** I take part in those joint committees and find them extremely useful but, like you, I had to plead for the Health, Social Care and Sport Committee to take the lead for the next joint committee on Tuesday. You have, as convener—

**The Deputy Presiding Officer:** Through the chair, please.

**Sue Webber:** I apologise. Audrey Nicoll, as convener of the Criminal Justice Committee, has given much time to the joint committee. Is the member delighted, as I am, that we are now using the time of the Health, Social Care and Sport Committee?

**The Deputy Presiding Officer:** Audrey Nicoll, I can give you the time back.

**Audrey Nicoll:** I am pleased to hear the member's positive remarks about the cross-committee work. The spirit of the work is to approach such cross-cutting issues in a more appropriate and collegiate way, and I am happy for the member's committee to take the lead at the next meeting.

An issue that we considered from the outset was how to progress the establishment of safer drug consumption rooms in Scotland. Ahead of our meeting next week, we asked the Lord Advocate whether she could provide an update on her consideration of a pilot of a safer drug consumption facility in Glasgow. The minister helpfully outlined the Lord Advocate's commitment to that in her response to Jackie Baillie's intervention. In her response to the joint committee, the Lord Advocate indicated that she

"would be prepared to publish a statement of prosecution policy to the effect that it would not be in the public interest to prosecute users of that facility in terms of section 5(2) of the Misuse of Drugs Act 1971 for simple possession offences committed within the confines of the facility."

That paves the way towards the development of a pilot of a drug consumption room service in Glasgow and is greatly welcome, particularly given that Glasgow City has had the highest rate of drug deaths over the past five years.

I have to say that that approach is a far cry from the United Kingdom Government's white paper, "Swift, Certain, Tough: New Consequences for Drug Possession".

**The Presiding Officer (Alison Johnstone):** Ms Nicoll, please conclude.

**Audrey Nicoll:** The white paper aims to escalate tougher penalties for so-called recreational drug users in England and Wales.

I urge members to support the Government's motion this afternoon, and I look forward to monitoring progress on the issue across Scotland.

16:17

**Annie Wells (Glasgow) (Con):** I have seen what addiction does to those we care about, and I have experienced losses because of it. The issue deserves to be treated as a national emergency, and it has deserved to be treated that way for more than a decade. Shamefully, the SNP is, once again, solely looking to play politics with the issue. It is looking to deflect blame away from its awful record and is trying to create a constitutional grievance instead of working together to save lives. Instead, it should work with the UK Government.

All the SNP does is try to fight the UK Government. The SNP's demand for decriminalisation is purely an attempt to create a grievance with the UK Government.

**Ben Macpherson:** Will the member take an intervention?

**Annie Wells:** I will make some progress.

The SNP is trying to find an excuse to blame Westminster for a problem that the Scottish Government created. It is completely dodging responsibility and accountability, so let me remind SNP members of the facts. Since the SNP came to power, drug deaths have reached record levels, which is why Nicola Sturgeon admitted that she took her "eye off the ball" on drug deaths. We had the same laws then as now, but the number of drug deaths was far lower.

On the SNP's watch, Scotland has the worst drug deaths problem in Europe. We have one of the worst drug deaths rates in the developed world, but that was not the case before the SNP came to power. We lose far more people than anywhere else in the UK, despite having exactly the same laws. Has anyone in Government thought to ask themselves why that is?

The problem is our recovery and treatment options. The SNP cut them several years ago, and the number of deaths increased dramatically. It cut the budget for alcohol and drug partnerships, and lives were lost as a result. It slashed the number of rehab beds, so thousands of people could not get the help that they needed. Once the SNP took those actions, it suddenly started talking about consumption rooms and decriminalisation. Before it reduced treatment options, we had never heard those ideas from the SNP. It never suggested them until after it cut budgets and drug deaths increased. It started suggesting those ideas purely to deflect from its own failures. Its motives are so see-through that it is utterly shameful.

**Ben Macpherson:** Does Annie Wells agree with me that, in recent years, there has been consideration of drug laws internationally? Does she agree that it is only right that, in Scotland and the UK, we also look at the legislation and the services collectively and that, in Scotland, that means looking at devolved and reserved matters to make sure that we are getting our policies right, so that harm reduction and people's welfare are at the forefront of our minds?

**Annie Wells:** The point that I am trying to make is that we have the same laws in Scotland as there are in the rest of the UK but we have almost three times more drug deaths in Scotland, so I do not think we need to go down that route. We need to see what more the SNP Government can do with the powers that it has.

**Ben Macpherson:** My point is broader. I wonder whether the member agrees that the whole consideration of these matters and their regulation needs to be looked at at Westminster level. The advisory council on the misuse of drugs produced factually based information, and committees at Westminster have looked at it. It is right that the Scottish Government is considering these matters in the round and looking at best practice elsewhere.

**Annie Wells:** I would say to the member that the Scottish Government needs to look at itself and take the responsibility that it has to take now for Scotland having the largest number of drug deaths in Europe and the developed world.

For a few years, the SNP seemed to be accepting some responsibility. Nicola Sturgeon apologised. She admitted that she took her eye off the ball, and she committed to putting money into drug treatment. But what is happening now? Funding for recovery services across Scotland has been subjected to significant cuts. The 2022-23 budget allocation by the Scottish Government to organisations that are helping those with addiction was £18.8 million less than it was the previous year.

Do you know what, Presiding Officer? It really hurts me to see treatment services cut when we have the worst drug deaths record in Europe. Communities such as mine, in Springburn, are devastated every day, week, month and year by another life lost to addiction. How can the Government stand here today, protesting about powers that it does not have, when it does not even use the powers that it does have? How can it blame anybody else for drug deaths increasing when it cut the treatment budgets? How can it possibly claim that it needed to change laws when we did not lose this many people to drugs when we had the exact same laws?

Instead of deflecting blame and pursuing a grievance with the UK Government, the SNP should be using the powers that it has now to their full extent. It could be doing so much more to save lives. It could increase the number of rehab beds. It could cut the length of time that people wait to get into addiction programmes of all kinds. It could bring in a right to recovery bill, to guarantee that everyone can get the treatment that they need before it is too late. That policy is backed by front-line organisations, experts and—crucially—families who have lost loved ones to drugs. It is a Scottish Conservative policy, but it is not a typical Conservative centre-right policy. It would enshrine a human rights approach in law, it is progressive and it would start to save lives immediately. I also urge the SNP Government not only to restore previous levels of funding to organisations that

help people with addiction, but to increase funding for those indispensable services.

Scotland can end this national shame, but it will depend on the SNP Government accepting responsibility for what is in its control. It must use the powers that it has now, not continue to focus on ways to fight the UK Government.

16:24

**Bob Doris (Glasgow Maryhill and Springburn) (SNP):** Before I give my prepared remarks, I say to Annie Wells that I do not think that I have anything remotely party political in my speech and that what I am about to put to her is offered in that spirit. The member mentioned budgets quite a lot, and we have a budget process coming up. I really hope—in all sincerity—that the Conservatives will not simply demand more money but will work constructively with our Scottish Government to deliver a balanced budget that meets the needs of those living with addiction and in recovery. Up until now, that has never happened—that is a matter of fact.

I am pleased to take part in today's debate, which, at its heart, seeks to embed a public health approach into Scotland's drugs policy. I absolutely support that approach. A key aspect of it—this is not the only aspect—will be the delivery of a pilot for a safer drug consumption facility.

Following Lord Advocate Dorothy Bain KC's statement on prosecution policy, the roadblock to rolling out a safe drug consumption facility appears to have been removed. It is vital to get the maximum level of consensus across all parties on how the delivery of that drug consumption facility will operate. What supports will be offered in relation to mental health, wider health, housing, welfare, treatment and rehabilitation, and what wider package of support will be provided to individuals and their families? What outcomes will be agreed in advance, and how will those be monitored and reported? Political consensus is required. How will we sensitively capture with dignity the voice of those with lived experience who use such a facility or those who choose not to? For those who choose not to or feel unable to, what options or alternatives will be developed? That is also part of the learning experience of any pilot.

This afternoon, much has been said about the possible decriminalisation of drugs. When the Scottish Government launched "A caring, compassionate and human rights informed drug policy for Scotland", many people and organisations welcomed it. Others read "decriminalisation" and thought "legalisation". That has to be a concern.



I believe that decriminalising possession for personal use—which must be part of a wider review of drug laws—is, on balance, the right thing to do. However, we need to be clear about what we mean by decriminalisation, and we need to be clear about what support will be available for those found in possession of class A drugs. Decriminalisation is not a free pass. It has to be part of a wider public health approach that we have been talking about this afternoon that involves harm reduction, rehabilitation and recovery. I think that Mr Sweeney referred to the need for a whole-system approach.

Russell Findlay commented on serious and organised crime. Even if I do not agree with his tone or characterisation of decriminalisation, Parliament should still engage with such concerns. At times, it can be hugely challenging for Police Scotland to tackle and take down low-level drug dealers, let alone those higher up the food chain. We must ensure that decriminalisation leads to such dealers and the carnage that they can cause being increasingly targeted, not tolerated. That can still happen with decriminalisation.

I turn to the need to continue to expand access to rehabilitation services, as well as the right to rehab. If public health is to be at the heart of our approach to the drug deaths crisis, we must provide the most appropriate treatment. It is not about a right to rehab; it is about a right to the most appropriate treatment.

**Brian Whittle:** I am listening carefully to what the member is saying—I know that he is very considered in his contributions to these debates. Does he agree with me that third sector organisations are crucial for the delivery of those services, as they are most likely to be able to access those who are furthest removed from our society? Continuing to cut the budgets of those organisations will be counterproductive. If we are to give everybody the right to recovery, they need to be able to access the services.

**Bob Doris:** I agree with Mr Whittle about the importance of third sector organisations. They can bring real credibility in support for those living with addiction and those seeking recovery. I would always want to see their budgets increase, and that is something that we need to look at in the next budget process. As I said to Ms Wells, I hope that we can come together as a Parliament to do that.

As I was saying, a public health policy has to be at the heart of our approach to treatment, as well as the right to the most appropriate treatment. For some, that will be the right to rehab. In that context, who would not support the right to rehab? However, we obviously have to see the details of any bill that comes before the Parliament.

As I have a little time left, I will mention one of those third sector organisations. SISCO—Sustainable Interventions Supporting Change Outside—is based in Springburn, in my constituency. I am wary of mentioning it because I did not say to Natalie Logan that I would mention it in Parliament this afternoon, and I do not like to do that, Presiding Officer.

SISCO has just opened a wonderful facility in the old Clydesdale bank at Springburn shopping centre. Everyone passing can see it—it is public facing. There is a massive banner on the window that talks about helping prisoners to build a bridge between prison and the community. SISCO does not shy away from the fact that vulnerable people are at the heart of our community and need peer-led support, pathways to recovery and pathways back to productive lives within the community. Organisations such as that are also a part of the solution to tackling Scotland's drug deaths crisis.

**The Presiding Officer:** We move to winding up speeches.

16:31

**Pauline McNeill (Glasgow) (Lab):** Scotland has a higher proportion of drug deaths than any other country in Europe; our fatal drug overdose rate is also the highest in Europe per head of population. The joint committee on drug deaths report highlights that that cannot be explained simply by the link between deprivation and drug misuse. As others have said, each death is a personal tragedy for them, their friends and families and their communities. I think that we all agree that the situation is a stain on Scotland as a nation, and I believe that every single one of those deaths is preventable.

I commend all the speeches this afternoon, from whatever perspective they came, but I want to mention the speeches of Michael Marra and Annie Wells, because I think that they came from their passion in representing communities that are blighted by drugs.

The introduction of safe consumption rooms is an issue that I have been passionately involved in since 2018. Along with Gillian Mackay and Gillian Martin, I questioned the then UK minister, Kit Malthouse, at the joint committee, and pointed out that there were many countries where drug consumption rooms had saved lives and made a difference. I chaired the first meeting in this Parliament that discussed safe consumption rooms, and it was thanks to the work of Recovering Justice that it hosted the wonderful Nanna Gofredsen, the Danish street lawyer who was instrumental in changing the Danish Government's policy on that. I also want to praise the work of my colleague Paul Sweeney and Peter

Krykant, who have been instrumental in getting a change in policy.

It is clear that Scotland is lagging behind the rest of the UK on tackling drug addiction and overdose. The last opportunity, I believe, is to set a path and to know, as Michael Marra said in his speech, that we can change that for all time. The UK Government's first Home-Office-licensed drug checking service, run in Bristol by The Loop, a non-profit non-governmental organisation, is expected to start regular testing in the coming months. The service was approved in early 2022. The Loop also introduced event-based drug checking in 2016 and community-based drug checking in 2018.

A Home Office pilot drug checking service was also launched in Somerset in 2019. Furthermore, an online drug checking service funded by the Welsh Government was launched as far back as October 2013, so we can see what work we have to do to catch up. If England and Wales have been able to establish such facilities, there is no reason why Scotland should not have those services by now.

The Scottish Government said in its recent paper, "A caring, compassionate and human rights informed drug policy for Scotland", that possession for personal supply should be decriminalised in Scotland. However, as others have said, we arguably have the best approach here in Scotland, due to the Lord Advocate, Dorothy Bain QC, once again proving to be innovative and responsive in relation to personal use.

Two years ago, the recorded police warning scheme was extended to include class A drugs. The scheme enables police officers to show discretion and issue a warning instead of charging an individual for possession, where officers believe that that is appropriate. The scheme has been in place since 2016, but it previously applied to class B and C drugs. Therefore, we already have ways in place whereby people suffering from addiction can be diverted, where that is appropriate.

I want to mention the drugs court that was set up in Glasgow in 2003, which has now been going for 20 years. I ask the minister, in summing up, to update Parliament on the roll-out of drugs courts and how useful they are in 2023.

There is no publicly available data on whether the police warning system is working effectively. For example, we do not know how many people with an addiction have received a warning, what services people have been diverted to or what the outcomes have been. It would be wise to have some evaluation to ensure that individuals are getting the help that they most desperately need.

I believe that the powers to end Scotland's drugs crisis lie here in Scotland and in St Andrew's house—in the Scottish Government. They include powers over our entire health system, drug treatment services, mental health services, social care, policing and prisons. The former head of the Scottish Drug Deaths Taskforce, Catriona Matheson, said:

"the Scottish Government needs to focus on what we can do now in Scotland without trying to divert attention to Westminster and the Misuse of Drugs Act."

It is also worth bearing in mind that the areas related to UK-wide legislation are only a small subset of the areas that we need to look at. On the ground, there is clearly a lot to be done, and that was reflected in the most recent drug death figures and overdose data. The Scottish Government might truly believe that it is doing everything that it can within its powers to deal with the crisis through the national mission that was announced in January 2021 and the £250 million package, but the true test is in delivery.

I therefore welcome the recent investments for the sector but, as Annie Wells and others have said, the cuts to budgets have had a staggering impact on recovery services. The fact that, after four years, we have a green light for one pilot overdose prevention facility when we are in a public health emergency is very telling. Scotland's drug deaths crisis is a matter of national shame. Scottish Labour believes that drug consumption rooms will help as part of a wider effort to increase the number of facilities to keep people safe.

The Lord Advocate's decision will help to lay the groundwork for the establishment of a safe consumption room in Glasgow. John Mason has welcomed that, and I do, too. However, I point out to Parliament that it is important to discuss with the communities and local representatives how the room will actually function. I understand that there is concern that the location for the first consumption room, in Calton in Glasgow, might be a bit isolated, with no bus service. It is important to have those conversations to ensure that we are doing it correctly.

It is important to continue cross-party working to end the scandalous level of drug deaths in Scotland but, ultimately, that is for the Scottish Government, which has the powers to lead on the issue. It must put investment into recovery services and be accountable for its decisions.

16:38

**Sandesh Gulhane (Glasgow) (Con):** I refer members to my entry in the register of interests, which shows that I am a practising NHS general practitioner.

Minister Elena Whitham states in her motion that the Scottish Government is required

“to use every lever at its disposal to save and improve lives”,

but has it done so? Well, it has not done so since 16 May 2007, when the SNP took office, and it did not do so even as it watched the upward trend in drug misuse skyrocket from 2013.

Let us consider just one of the levers that the minister speaks of. We know that, if the SNP was serious about exploring how to introduce a pilot drug consumption room, it could have done that much earlier—that is, if it really wanted to. We now know that the SNP did not need the UK Government to devolve any powers to Holyrood to pilot the initiative.

That makes one consider that the SNP preferred to stoke grievance and blame Westminster rather than do something. Perhaps former health minister Joe FitzPatrick will want to correct the record, given what Michael Marra has told us.

Sue Webber reminded us that the Scottish Government has not met its own MAT standards for drugs; she also reminded us of the devastating effects that are caused by heinous gangs forcing families out of their homes.

I thank Jackie Baillie for supporting Douglas Ross’s proposed right to recovery bill. I agree with her that it would not be a magic bullet but would be part of the solution in helping people to get off drugs and alcohol.

Collette Stevenson spoke bravely about her own experience. I strongly agree with her, Brian Whittle and Audrey Nicoll on the amazing role that the third sector can and does play.

Russell Findlay is absolutely correct to say that the normalisation of drugs is unforgivable. That brings me on to Alex Cole-Hamilton, who spoke about Portugal, as did many SNP members. In July this year, *The Washington Post* reported that police are blaming a spike in the number of people using drugs for a rise in crime, and for overdose rates hitting a 12-year high. Porto’s mayor said:

“These days in Portugal, it is forbidden to smoke tobacco outside a school or a hospital. It is forbidden to advertise ice cream and sugar candies. And yet, it is allowed for [people] to be there, injecting drugs ... We’ve normalized it.”

That is not a Scotland that I want.

Sue Webber reminded us that Portland, Oregon decriminalised drugs in 2021. The authorities there recorded a sharp rise in overdose deaths and an explosion in crime. The city’s public safety commissioner has implored Scotland to avoid the tragedy that they are going through. Minister Elena Whitham said in her speech that that experience

did not count, because that was all that Portland did. However, I remind her that ballot measure 110 in Portland also directed marijuana tax dollars towards addiction services. That amounted to \$265 million. Despite that, the city is reversing the measure.

Annie Wells spoke passionately about addictions and went on to say that savage cuts to rehab led to an explosion of drug deaths. It is right to ask how the SNP can possibly ask for more laws when it does not even use the current ones.

I remind members that drugs do harm. The issue is not just about deaths. I have patients coming to see me who have significant health harms from drug use. So-called soft drugs, such as cannabis, can cause psychosis, depression and dependence. Drugs cost money—they are very expensive. People who use drugs need to spend more and more money on them, and that spend is above everything else and all others. It is above heating, food and time for their children. Drugs do harm. Members should never forget that.

I return to the matter of levers. We have spoken a lot about supervised drug injection facilities, but what about other levers? How is it going with helping people to get off drugs through treatment and rehabilitation? It is not going well, actually. The SNP cut £19 million from addiction services despite year-in, year-out record deaths, shamefully ripping away funding from front-line services. SNP members do not like to talk about that. That is why it suited them well to deflect from their own failures and blame Westminster for blocking drug consumption rooms.

As for tackling drug dealers—those who prey on our most vulnerable—the SNP really is championing a caring and compassionate drugs policy. The SNP considers criminals under the age of 25 not to be mature enough to be treated as adult criminals, even though they are mature enough to make other types of decisions. A 21-year-old cocaine dealer, who was twice caught trying to shift class A drugs, which would usually result in a six-month custodial sentence, avoided jail due to the SNP’s compassionate sentencing guidelines.

If the SNP is serious about being caring and compassionate, it will commit to ensuring that any Scot who asks for treatment and rehab will get it, and get it in a timely fashion. Backing a fully fledged right to recovery bill is the way to go.

The route to avoid is to simply decriminalise drugs. At a time when highly dangerous synthetic opioids are now on the streets, decriminalisation will simply make it easier for drug dealers and organised crime gangs to operate. Let us not forget that we know that gangs even traffic children as mules to move small quantities of

drugs around. Let us not drop our guard any further.

I would like to remind the minister, in her closing speech, to please answer the questions that Sue Webber put to her a couple of hours ago. How are drug consumption rooms going to work, practically? Will independent assessors look at the data? Will the methodology be made public? What are the success criteria?

Implementation is key, and it is incumbent on the Government to have a transparent and clear approach when it comes to the pilot.

16:46

**The Minister for Social Care, Mental Wellbeing and Sport (Maree Todd):** Thank you to all members for contributing to what was largely a helpful, thoughtful and constructive debate. I will try to pick up on the many points that were raised during the debate, so please bear with me as I try to get through them all.

I recognise that many of our proposals would have been unthinkable propositions 20 years ago, and clearly some Opposition members continue to find them unpalatable today, but I strongly encourage those who remain sceptical about our approach to explain and evidence why they believe that the current approach is working when it so clearly is not.

As Elena Whitham said in her opening speech, support for decriminalisation is no longer an extreme position. The more we speak to those who work in the drugs field, and to those with experience of the issues that drug users and their families face, the more we realise that a new approach is not radical at all. Instead, it is an evidence-based alternative. It is a big step forward, to be sure, but everything that we propose has been tried and tested many times over.

**Russell Findlay:** The minister talked about decriminalisation being the answer. Does she accept that the Lord Advocate has effectively already decriminalised possession of drugs in Scotland?

**Maree Todd:** No, I do not accept that premise. In response to Russell Findlay's earlier comments, it is very important that we recognise the difference between decriminalisation and legalisation. Decriminalisation, as proposed by us, purely relates to personal drug use, and it is about the removal of criminal penalties. In some jurisdictions, those can be replaced with civil sanctions, such as fines, while in others, no penalties are applied.

Legalisation is the process of ending or repealing the prohibition of a drug. Such policy is

often misrepresented as a free-for-all on drugs. In fact, I think that Russell Findlay used those very words. However, many forms of regulation can and have been applied to legal markets for substances and they range from the more restrictive approach that we have for some medicines to the less restrictive approach that we have for substances such as caffeine. What is needed in this debate is an informed and evidence-based discussion, not misrepresentation and misinformation.

**Paul Sweeney:** Will the member take an intervention?

**Maree Todd:** I am happy to give way this once, but as I said there are many issues from the debate that I will pick up on during my closing speech.

**Paul Sweeney:** Does the minister agree with the point that decriminalisation is, in effect, a matter of prosecutorial discretion and public interest, in the sense that the prosecution of a possession offence is effectively decriminalised in Scotland, which I support, but that it is not a matter that requires a legal change to the 1971 act?

**Maree Todd:** I am aware of the member's views on decriminalisation, and I will come on to explain why we need legislative change as well as decriminalisation and what limits are placed on our progress by the Misuse of Drugs Act 1971.

Our proposals are only radical when we focus on cultural norms, prejudice and moral judgments rather than looking at the evidence of what will reduce harm and support vulnerable people.

It has been really interesting to hear members speak of their experiences with some of their constituents. I have to pay tribute to Collette Stevenson who, when talking about the death of her brother Brian in 2002, reminded us again of the brutal impact of drug deaths for a long time after people are lost. It is a stark reminder, if we need it, that the loss that drug deaths cause knows absolutely no bounds.

We have heard heartbreaking stories in the debate but also really inspiring ones. We should not write off people with drug problems. We should not deny them the opportunities that are available to others simply because they use drugs. We are absolutely clear that stigma kills. People already use drugs despite the criminal sanctions that are in place. Earlier this year, the UN highlighted that drug use continues to grow despite the harms that it causes; it is therefore incumbent on us to do everything that we can to reduce those harms, regardless of the moral debate.

On the right to recovery bill, we are already committed to taking a human-rights-based approach to reducing drug-related deaths and

harms. We support the principle of getting more people into treatment and recovery that is right for them. However, although we have repeatedly been told that the right to recovery bill is imminent, we have yet to see it, so we do not know how the proposals will work in practice—

**Sue Webber:** Will the member take an intervention?

**Maree Todd:** Would Sue Webber like to explain why that is and how the concerns that were raised at the bill's consultation stage have been addressed?

**Sue Webber:** It has been mentioned previously that the process of a member's bill makes it quite challenging to have a timeline. We continue to put that point on the record but we continue to get the same evasive statements from the Scottish Government, which make it seem as though Douglas Ross and the Conservative Party are not doing enough to introduce the bill. Although we have concerns and want the bill to be introduced, limitations exist with the non-Government bills unit as it tries to cope with the capacity.

**Maree Todd:** I assure Parliament again that we are committed to giving the proposed member's bill careful consideration when it is eventually published.

We are working hard to tackle drug deaths and harms within the powers that we have, including investing an additional £250 million during the current parliamentary session. To counter Annie Wells's and Sandesh Gulhane's claims that budgets are being cut, let me set out the increases over the past three years. In 2021-22, the total drugs and alcohol budget was £140.7 million, in 2022-23, it was £141.9 million and the 2023-24 budget has increased it to £155.5 million.

The roll-out of the MAT standards, which set out what people should expect from services and improve access to services, choice of treatment options and wraparound support to people who are most at risk from drug harm and drug-related death, is a cornerstone of our national mission. The most recent Public Health Scotland benchmarking report found that "substantial progress" had been made

"with implementation of the MAT standards"

throughout the ADP areas. However, there is still a lot to do for full, consistent and sustained implementation of the standards across Scotland. We are fully committed to sustaining that implementation and will continue to do everything that we can to improve service provision. Many more people take drugs than present for treatment and support. Decriminalising drugs will take them out of the criminal justice system and enable those

who have dependency issues to seek the support that they need.

A lack of funding is not the issue here. We have committed an additional £250 million to delivering the national mission on drugs. The majority of funding goes to alcohol and drug partnerships across Scotland, but the funding also supports third sector and core-funded organisations. In November 2022, we published the first national mission annual report, which included financial reports to improve transparency and show the direction and impact of the funding that was committed. In 2022, a total of £106.8 million was available to alcohol and drugs partnerships.

A number of people have spoken about safe consumption facilities. I welcome the position that the Lord Advocate has taken, as is set out in her response to the Criminal Justice Committee. The Lord Advocate's position now gives Glasgow the option of setting up a safer drug consumption facility pilot, which will operate within existing legislation.

**Russell Findlay:** Many members have spoken about "safe" consumption rooms, while others have used the word "safer". That is an important distinction. Does the minister agree that the latter word is more accurate because some drugs can never be considered "safe"?

**Maree Todd:** I would not disagree at all, which is an unusual situation for myself and that particular member.

Although the service will be limited in what it can do because of the Misuse of Drugs Act 1971, we are absolutely confident that the safer drug consumption facility will save lives. I will, however, clarify what we cannot do because of that act. Our safer drug consumption facilities cannot have a low access threshold, we cannot roll out low-threshold access to heroin-assisted treatment, we cannot have an inhalation room and we cannot supply consumption pipes in the current legal situation.

We know that a safer drug consumption room is not a magic bullet, but we also know from evidence from more than 100 facilities worldwide that safer drug consumption rooms work, so it is high time to see that approach being piloted in Scotland.

If we are to continue to make progress with drug consumption facilities, we must do it in a way that has the full confidence of everyone who would use them, of the agencies involved and of the general public. That is why we have worked with partners to develop an approach within the current law that will allow any facility to operate to the maximum effect.

A number of speakers raised the issue of evaluation. The Glasgow health and social care partnership will establish an evaluation package in line with what the Lord Advocate set out in her response last week.

On funding, I assure members that there will be no loss to existing drug and alcohol services and no cuts will be made to fund the pilot. Money has been earmarked in the national mission budget in the knowledge that Glasgow might have to proceed very quickly following the Lord Advocate's announcement and discussions are being held to ensure that the required funding will be made available to Glasgow.

Regarding operation, the pilot proposal that went to the Lord Advocate contained full standard operating procedures for the facility and there is no doubt that the Glasgow health and social care partnership will be able to meet that agreement, once the integration joint board has looked at it.

Staff liability will be exactly the same as in any other NHS facility. Staff will be fully covered by the liability arrangements that would be in place in any NHS facility and the consumption room will operate just like any other NHS service.

A number of speakers raised the issue of heroin-assisted treatment. We remain committed to the wider establishment of MAT services across Scotland. In January this year, we made funding available to allow Dundee alcohol and drug partnership to fund a scoping study and that same funding would be available to any other area that is interested in taking forward that approach.

A few contributors seemed to equate a more humane approach to helping those who take drugs with being soft on crime. Let me be clear: serious organised crime is absolutely no respecter of borders or societal norms and Scotland is not immune to its impact. The Scottish Government and its partners on the serious organised crime task force are fully committed to tackling and reducing the harm that such crime causes to our communities. That commitment includes disrupting the activities of organised crime groups and holding them to account for the harm that they cause to our communities, our businesses and, particularly, to our most vulnerable people. Those in the serious organised crime task force and its partners, including the Convention of Scottish Local Authorities, the NHS, Police Scotland, the Society of Local Authority Chief Executives, the National Crime Agency and His Majesty's Revenue and Customs will continue to use every means at their disposal to disrupt serious organised crime.

Police Scotland and other law enforcement agencies continue to have significant operational success. The UK-wide operation Venetic removed

substantial quantities of drugs from our streets, making a number of arrests in the process. Some examples of that operational success included the recovery of cocaine with an estimated street value of around £0.25 million in Moray and of £500,000 worth of cannabis in Lanarkshire, and the jailing of a county lines gang for a total of 22 years, following the seizure of a significant amount of cash and class A drugs.

In its first report of this decade, which was launched on 7 May 2020, the Global Commission on Drug Policy outlines how the current international drug control regime works for the benefit of transnational organised crime. It highlights how years of repressive policies that have been targeted at non-violent offenders have resulted in mass incarceration and produced countless adverse impacts on public health, the rule of law and social cohesion while reinforcing a criminal elite. I am fairly certain that that international body has no interest in the constitutional wrangling that is going on in Scotland—

**The Presiding Officer:** I ask you to conclude, minister.

**Maree Todd:** I highlight that simply because, if that is all that it is about, why are so many global institutions asking for a change of law?

In her opening speech, Elena Whitham reflected on the shift in how the drugs issue is now considered. It is now viewed first and foremost as a public health issue by this Government and, I think, by the Parliament as a whole. I believe that there is genuine willingness across the chamber to offer support to those whose lives have been blighted by drug use, even if there remain areas of disagreement about how best to offer that support.

As we have said previously, the issue is too important and the stakes are too high for this to be an area for political point scoring. We need to be guided by evidence rather than anecdote.

**The Presiding Officer:** I must ask you to conclude, minister.

**Maree Todd:** We need to work constructively with other political parties. There is a long way to go, but we have made meaningful first steps.

**The Presiding Officer:** Thank you, minister. That concludes the debate on drug law reform.

## Decision Time

17:01

**The Presiding Officer (Alison Johnstone):**

There are three questions to be put as a result of today's business. I remind members that, if the amendment in the name of Sue Webber is agreed to, the amendment in the name of Jackie Baillie will fall.

The first question is, that amendment S6M-10490.1, in the name of Sue Webber, which seeks to amend motion S6M-10490, in the name of Elena Whitham, on drug law reform, be agreed to. Are we agreed?

**Members:** No.

**The Presiding Officer:** There will be a division. There will be a short suspension to allow members to access digital voting.

17:01

*Meeting suspended.*

17:04

*On resuming—*

**The Presiding Officer:** We will now proceed with the vote on amendment S6M-10490.1, in the name of Sue Webber.

The vote is now closed.

**Paul O'Kane (West Scotland) (Lab):** On a point of order, Presiding Officer. My app would not connect. I would have abstained.

**The Presiding Officer:** Thank you. We will ensure that that is recorded, Mr O'Kane.

### For

Balfour, Jeremy (Lothian) (Con)  
 Briggs, Miles (Lothian) (Con)  
 Burnett, Alexander (Aberdeenshire West) (Con)  
 Carlaw, Jackson (Eastwood) (Con)  
 Carson, Finlay (Galloway and West Dumfries) (Con)  
 Dowey, Sharon (South Scotland) (Con)  
 Findlay, Russell (West Scotland) (Con)  
 Gallacher, Meghan (Central Scotland) (Con)  
 Golden, Maurice (North East Scotland) (Con)  
 Greene, Jamie (West Scotland) (Con)  
 Gulhane, Sandesh (Glasgow) (Con)  
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)  
 Hoy, Craig (South Scotland) (Con)  
 Halcro Johnston, Jamie (Highlands and Islands) (Con)  
 Kerr, Liam (North East Scotland) (Con)  
 Kerr, Stephen (Central Scotland) (Con)  
 Lumsden, Douglas (North East Scotland) (Con)  
 McCall, Roz (Mid Scotland and Fife) (Con)  
 Mountain, Edward (Highlands and Islands) (Con)  
 Mundell, Oliver (Dumfriesshire) (Con)  
 Ross, Douglas (Highlands and Islands) (Con)  
 Simpson, Graham (Central Scotland) (Con)

Smith, Liz (Mid Scotland and Fife) (Con)  
 Stewart, Alexander (Mid Scotland and Fife) (Con)  
 Webber, Sue (Lothian) (Con)  
 Wells, Annie (Glasgow) (Con)  
 White, Tess (North East Scotland) (Con)  
 Whittle, Brian (South Scotland) (Con)

### Against

Adam, George (Paisley) (SNP)  
 Adam, Karen (Banffshire and Buchan Coast) (SNP)  
 Adamson, Clare (Motherwell and Wishaw) (SNP)  
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)  
 Arthur, Tom (Renfrewshire South) (SNP)  
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)  
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)  
 Brown, Siobhian (Ayr) (SNP)  
 Burgess, Ariane (Highlands and Islands) (Green)  
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)  
 Chapman, Maggie (North East Scotland) (Green)  
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)  
 Cole-Hamilton, Alex (Edinburgh Western) (LD)  
 Constance, Angela (Almond Valley) (SNP)  
 Don, Natalie (Renfrewshire North and West) (SNP)  
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)  
 Dornan, James (Glasgow Cathcart) (SNP)  
 Dunbar, Jackie (Aberdeen Donside) (SNP)  
 Ewing, Fergus (Inverness and Nairn) (SNP)  
 FitzPatrick, Joe (Dundee City West) (SNP)  
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)  
 Gibson, Kenneth (Cunninghame North) (SNP)  
 Gougeon, Mairi (Angus North and Mearns) (SNP)  
 Gray, Neil (Airdrie and Shotts) (SNP)  
 Greer, Ross (West Scotland) (Green)  
 Harper, Emma (South Scotland) (SNP)  
 Harvie, Patrick (Glasgow) (Green)  
 Haughey, Clare (Rutherglen) (SNP)  
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)  
 Hyslop, Fiona (Linlithgow) (SNP)  
 Kidd, Bill (Glasgow Anniesland) (SNP)  
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)  
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)  
 Mackay, Gillian (Central Scotland) (Green)  
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)  
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)  
 Maguire, Ruth (Cunninghame South) (SNP)  
 Mason, John (Glasgow Shettleston) (SNP)  
 Matheson, Michael (Falkirk West) (SNP)  
 McAllan, Màiri (Clydesdale) (SNP)  
 McArthur, Liam (Orkney Islands) (LD)  
 McKee, Ivan (Glasgow Provan) (SNP)  
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)  
 McLennan, Paul (East Lothian) (SNP)  
 McMillan, Stuart (Greenock and Inverclyde) (SNP)  
 McNair, Marie (Clydebank and Milngavie) (SNP)  
 Minto, Jenni (Argyll and Bute) (SNP)  
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)  
 Regan, Ash (Edinburgh Eastern) (SNP)  
 Rennie, Willie (North East Fife) (LD)  
 Robertson, Angus (Edinburgh Central) (SNP)  
 Robison, Shona (Dundee City East) (SNP)  
 Roddick, Emma (Highlands and Islands) (SNP)  
 Ruskell, Mark (Mid Scotland and Fife) (Green)  
 Slater, Lorna (Lothian) (Green)  
 Somerville, Shirley-Anne (Dunfermline) (SNP)  
 Stevenson, Collette (East Kilbride) (SNP)  
 Stewart, Kaukab (Glasgow Kelvin) (SNP)  
 Stewart, Kevin (Aberdeen Central) (SNP)  
 Sturgeon, Nicola (Glasgow Southside) (SNP)  
 Swinney, John (Perthshire North) (SNP)  
 Thomson, Michelle (Falkirk East) (SNP)

Todd, Maree (Caithness, Sutherland and Ross) (SNP)  
 Tweed, Evelyn (Stirling) (SNP)  
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)  
 Wishart, Beatrice (Shetland Islands) (LD)

#### Abstentions

Baillie, Jackie (Dumbarton) (Lab)  
 Baker, Claire (Mid Scotland and Fife) (Lab)  
 Choudhury, Foysol (Lothian) (Lab)  
 Clark, Katy (West Scotland) (Lab)  
 Duncan-Glancy, Pam (Glasgow) (Lab)  
 Grant, Rhoda (Highlands and Islands) (Lab)  
 Griffin, Mark (Central Scotland) (Lab)  
 Johnson, Daniel (Edinburgh Southern) (Lab)  
 Leonard, Richard (Central Scotland) (Lab)  
 Marra, Michael (North East Scotland) (Lab)  
 McNeill, Pauline (Glasgow) (Lab)  
 Mochan, Carol (South Scotland) (Lab)  
 O'Kane, Paul (West Scotland) (Lab)  
 Sarwar, Anas (Glasgow) (Lab)  
 Smyth, Colin (South Scotland) (Lab)  
 Sweeney, Paul (Glasgow) (Lab)  
 Whitfield, Martin (South Scotland) (Lab)

**The Presiding Officer:** The result of the division on amendment S6M-10490.1, in the name of Sue Webber, is: For 28, Against 66, Abstentions 17.

*Amendment disagreed to.*

**The Presiding Officer:** The next question is, that amendment S6M-10490.3, in the name of Jackie Baillie, which seeks to amend motion S6M-10490, in the name of Elena Whitham, on drug law reform, be agreed to. Are we agreed?

**Members:** No.

**The Presiding Officer:** There will be a division.

#### For

Baillie, Jackie (Dumbarton) (Lab)  
 Baker, Claire (Mid Scotland and Fife) (Lab)  
 Choudhury, Foysol (Lothian) (Lab)  
 Clark, Katy (West Scotland) (Lab)  
 Cole-Hamilton, Alex (Edinburgh Western) (LD)  
 Duncan-Glancy, Pam (Glasgow) (Lab)  
 Grant, Rhoda (Highlands and Islands) (Lab)  
 Griffin, Mark (Central Scotland) (Lab)  
 Johnson, Daniel (Edinburgh Southern) (Lab)  
 Leonard, Richard (Central Scotland) (Lab)  
 Marra, Michael (North East Scotland) (Lab)  
 McArthur, Liam (Orkney Islands) (LD)  
 McNeill, Pauline (Glasgow) (Lab)  
 Mochan, Carol (South Scotland) (Lab)  
 O'Kane, Paul (West Scotland) (Lab)  
 Rennie, Willie (North East Fife) (LD)  
 Sarwar, Anas (Glasgow) (Lab)  
 Smyth, Colin (South Scotland) (Lab)  
 Sweeney, Paul (Glasgow) (Lab)  
 Whitfield, Martin (South Scotland) (Lab)  
 Wishart, Beatrice (Shetland Islands) (LD)

#### Against

Adam, George (Paisley) (SNP)  
 Adam, Karen (Banffshire and Buchan Coast) (SNP)  
 Adamson, Clare (Motherwell and Wishaw) (SNP)  
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)  
 Arthur, Tom (Renfrewshire South) (SNP)  
 Balfour, Jeremy (Lothian) (Con)

Beattie, Colin (Midlothian North and Musselburgh) (SNP)  
 Briggs, Miles (Lothian) (Con)  
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)  
 Brown, Siobhian (Ayr) (SNP)  
 Burgess, Ariane (Highlands and Islands) (Green)  
 Burnett, Alexander (Aberdeenshire West) (Con)  
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)  
 Carlaw, Jackson (Eastwood) (Con)  
 Carson, Finlay (Galloway and West Dumfries) (Con)  
 Chapman, Maggie (North East Scotland) (Green)  
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)  
 Constance, Angela (Almond Valley) (SNP)  
 Don, Natalie (Renfrewshire North and West) (SNP)  
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)  
 Dornan, James (Glasgow Cathcart) (SNP)  
 Dowey, Sharon (South Scotland) (Con)  
 Dunbar, Jackie (Aberdeen Donside) (SNP)  
 Ewing, Fergus (Inverness and Nairn) (SNP)  
 Findlay, Russell (West Scotland) (Con)  
 FitzPatrick, Joe (Dundee City West) (SNP)  
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)  
 Gallacher, Meghan (Central Scotland) (Con)  
 Gibson, Kenneth (Cunninghame North) (SNP)  
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 Gougeon, Mairi (Angus North and Mearns) (SNP)  
 Gray, Neil (Airdrie and Shotts) (SNP)  
 Greene, Jamie (West Scotland) (Con)  
 Greer, Ross (West Scotland) (Green)  
 Gulhane, Sandesh (Glasgow) (Con)  
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)  
 Harper, Emma (South Scotland) (SNP)  
 Harvie, Patrick (Glasgow) (Green)  
 Haughey, Clare (Rutherglen) (SNP)  
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)  
 Hoy, Craig (South Scotland) (Con)  
 Hyslop, Fiona (Linlithgow) (SNP)  
 Halcro Johnston, Jamie (Highlands and Islands) (Con)  
 Kerr, Liam (North East Scotland) (Con)  
 Kerr, Stephen (Central Scotland) (Con)  
 Kidd, Bill (Glasgow Anniesland) (SNP)  
 Lumsden, Douglas (North East Scotland) (Con)  
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)  
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)  
 Mackay, Gillian (Central Scotland) (Green)  
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)  
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)  
 Maguire, Ruth (Cunninghame South) (SNP)  
 Mason, John (Glasgow Shettleston) (SNP)  
 Matheson, Michael (Falkirk West) (SNP)  
 McAllan, Màiri (Clydesdale) (SNP)  
 McCall, Roz (Mid Scotland and Fife) (Con)  
 McKee, Ivan (Glasgow Provan) (SNP)  
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)  
 McLennan, Paul (East Lothian) (SNP)  
 McMillan, Stuart (Greenock and Inverclyde) (SNP)  
 McNair, Marie (Clydebank and Milngavie) (SNP)  
 Minto, Jenni (Argyll and Bute) (SNP)  
 Mountain, Edward (Highlands and Islands) (Con)  
 Mundell, Oliver (Dumfriesshire) (Con)  
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)  
 Regan, Ash (Edinburgh Eastern) (SNP)  
 Robertson, Angus (Edinburgh Central) (SNP)  
 Robison, Shona (Dundee City East) (SNP)  
 Roddick, Emma (Highlands and Islands) (SNP)  
 Ross, Douglas (Highlands and Islands) (Con)  
 Ruskell, Mark (Mid Scotland and Fife) (Green)  
 Simpson, Graham (Central Scotland) (Con)  
 Slater, Lorna (Lothian) (Green)  
 Smith, Liz (Mid Scotland and Fife) (Con)



Somerville, Shirley-Anne (Dunfermline) (SNP)  
 Stevenson, Collette (East Kilbride) (SNP)  
 Stewart, Alexander (Mid Scotland and Fife) (Con)  
 Stewart, Kaukab (Glasgow Kelvin) (SNP)  
 Stewart, Kevin (Aberdeen Central) (SNP)  
 Sturgeon, Nicola (Glasgow Southside) (SNP)  
 Swinney, John (Perthshire North) (SNP)  
 Thomson, Michelle (Falkirk East) (SNP)  
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)  
 Tweed, Evelyn (Stirling) (SNP)  
 Webber, Sue (Lothian) (Con)  
 Wells, Annie (Glasgow) (Con)  
 White, Tess (North East Scotland) (Con)  
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)  
 Whittle, Brian (South Scotland) (Con)

**The Presiding Officer:** The result of the division on amendment S6M-10490.3, in the name of Jackie Baillie, is: For 21, Against 90, Abstentions 0.

*Amendment disagreed to.*

**The Presiding Officer:** The final question is, that motion S6M-10490, in the name of Elena Whitham, on drug law reform, be agreed to. Are we agreed?

**Members:** No.

**The Presiding Officer:** There will be a division.

#### For

Adam, George (Paisley) (SNP)  
 Adam, Karen (Banffshire and Buchan Coast) (SNP)  
 Adamson, Clare (Motherwell and Wishaw) (SNP)  
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)  
 Arthur, Tom (Renfrewshire South) (SNP)  
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)  
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)  
 Brown, Siobhian (Ayr) (SNP)  
 Burgess, Ariane (Highlands and Islands) (Green)  
 Callaghan, Stephanie (Uddingston and Bellshill) (SNP)  
 Chapman, Maggie (North East Scotland) (Green)  
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)  
 Cole-Hamilton, Alex (Edinburgh Western) (LD)  
 Constance, Angela (Almond Valley) (SNP)  
 Don, Natalie (Renfrewshire North and West) (SNP)  
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)  
 Dornan, James (Glasgow Cathcart) (SNP)  
 Dunbar, Jackie (Aberdeen Donside) (SNP)  
 Ewing, Fergus (Inverness and Nairn) (SNP)  
 FitzPatrick, Joe (Dundee City West) (SNP)  
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)  
 Gibson, Kenneth (Cunninghame North) (SNP)  
 Gougeon, Mairi (Angus North and Mearns) (SNP)  
 Gray, Neil (Airdrie and Shotts) (SNP)  
 Greer, Ross (West Scotland) (Green)  
 Harper, Emma (South Scotland) (SNP)  
 Harvie, Patrick (Glasgow) (Green)  
 Haughey, Clare (Rutherglen) (SNP)  
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)  
 Hyslop, Fiona (Linlithgow) (SNP)  
 Kidd, Bill (Glasgow Anniesland) (SNP)  
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)  
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)  
 Mackay, Gillian (Central Scotland) (Green)  
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)  
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)  
 Maguire, Ruth (Cunninghame South) (SNP)  
 Mason, John (Glasgow Shettleston) (SNP)

Matheson, Michael (Falkirk West) (SNP)  
 McAllan, Màiri (Clydesdale) (SNP)  
 McArthur, Liam (Orkney Islands) (LD)  
 McKee, Ivan (Glasgow Provan) (SNP)  
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)  
 McLennan, Paul (East Lothian) (SNP)  
 McMillan, Stuart (Greenock and Inverclyde) (SNP)  
 McNair, Marie (Clydebank and Milngavie) (SNP)  
 Minto, Jenni (Argyll and Bute) (SNP)  
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)  
 Regan, Ash (Edinburgh Eastern) (SNP)  
 Rennie, Willie (North East Fife) (LD)  
 Robertson, Angus (Edinburgh Central) (SNP)  
 Robison, Shona (Dundee City East) (SNP)  
 Roddick, Emma (Highlands and Islands) (SNP)  
 Ruskell, Mark (Mid Scotland and Fife) (Green)  
 Slater, Lorna (Lothian) (Green)  
 Somerville, Shirley-Anne (Dunfermline) (SNP)  
 Stevenson, Collette (East Kilbride) (SNP)  
 Stewart, Kaukab (Glasgow Kelvin) (SNP)  
 Stewart, Kevin (Aberdeen Central) (SNP)  
 Sturgeon, Nicola (Glasgow Southside) (SNP)  
 Swinney, John (Perthshire North) (SNP)  
 Thomson, Michelle (Falkirk East) (SNP)  
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)  
 Tweed, Evelyn (Stirling) (SNP)  
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)  
 Wishart, Beatrice (Shetland Islands) (LD)

#### Against

Baillie, Jackie (Dumbarton) (Lab)  
 Baker, Claire (Mid Scotland and Fife) (Lab)  
 Balfour, Jeremy (Lothian) (Con)  
 Briggs, Miles (Lothian) (Con)  
 Burnett, Alexander (Aberdeenshire West) (Con)  
 Carlaw, Jackson (Eastwood) (Con)  
 Carson, Finlay (Galloway and West Dumfries) (Con)  
 Choudhury, Foyso (Lothian) (Lab)  
 Clark, Katy (West Scotland) (Lab)  
 Dowey, Sharon (South Scotland) (Con)  
 Duncan-Glancy, Pam (Glasgow) (Lab)  
 Findlay, Russell (West Scotland) (Con)  
 Gallacher, Meghan (Central Scotland) (Con)  
 Golden, Maurice (North East Scotland) (Con)  
 Grant, Rhoda (Highlands and Islands) (Lab)  
 Greene, Jamie (West Scotland) (Con)  
 Griffin, Mark (Central Scotland) (Lab)  
 Gulhane, Sandesh (Glasgow) (Con)  
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)  
 Hoy, Craig (South Scotland) (Con)  
 Johnson, Daniel (Edinburgh Southern) (Lab)  
 Halcro Johnston, Jamie (Highlands and Islands) (Con)  
 Kerr, Liam (North East Scotland) (Con)  
 Kerr, Stephen (Central Scotland) (Con)  
 Leonard, Richard (Central Scotland) (Lab)  
 Lumsden, Douglas (North East Scotland) (Con)  
 Marra, Michael (North East Scotland) (Lab)  
 McCall, Roz (Mid Scotland and Fife) (Con)  
 McNeill, Pauline (Glasgow) (Lab)  
 Mochan, Carol (South Scotland) (Lab)  
 Mountain, Edward (Highlands and Islands) (Con)  
 Mundell, Oliver (Dumfriesshire) (Con)  
 O'Kane, Paul (West Scotland) (Lab)  
 Ross, Douglas (Highlands and Islands) (Con)  
 Sarwar, Anas (Glasgow) (Lab)  
 Simpson, Graham (Central Scotland) (Con)  
 Smith, Liz (Mid Scotland and Fife) (Con)  
 Smyth, Colin (South Scotland) (Lab)

Stewart, Alexander (Mid Scotland and Fife) (Con)  
 Sweeney, Paul (Glasgow) (Lab)  
 Webber, Sue (Lothian) (Con)  
 Wells, Annie (Glasgow) (Con)  
 White, Tess (North East Scotland) (Con)  
 Whitfield, Martin (South Scotland) (Lab)  
 Whittle, Brian (South Scotland) (Con)

**The Presiding Officer:** The result of the division on motion S6M-10490, in the name of Elena Whitham, is: For 66, Against 45, Abstentions 0.

*Motion agreed to,*

That the Parliament believes that every life lost through drugs is a tragedy and recognises that behind each statistic is a grieving family and community; agrees that the scale of the drug deaths emergency in Scotland requires the Scottish Government to use every lever at its disposal to save and improve lives using the best available evidence; further agrees that the principles of the Scottish Government's national mission should be rooted in a human rights informed, public health approach, not a criminal justice one; believes that the support for people with substance dependency should be in parity with other health conditions, removing unnecessary stigma and discrimination; supports the calls for an urgent review of the Misuse of Drugs Act 1971 to fully align the law with the public health response outlined in the Scottish Government paper, A Caring, Compassionate and Human Rights Informed Drug Policy for Scotland, of which decriminalising drugs for personal use is one part, and agrees that the Scottish Government should work constructively with the UK Government to either amend the Misuse of Drugs Act 1971 or devolve the powers to Scotland to draft its own drugs legislation that better reflects international best practice.

**The Presiding Officer:** That concludes decision time.

## Council Tax (Consultation)

**The Deputy Presiding Officer (Liam McArthur):** The final item of business is a members' business debate on motion S6M-10348, in the name of Willie Rennie, on the consultation on proposed council tax rises. The debate will be concluded without any question being put.

*Motion debated,*

That the Parliament notes the Scottish Government's Fairer Council Tax consultation on the raising of council tax rates for those in properties in valuation bands E to H, which closes on 20 September 2023; understands that, should these rises go ahead, 715,312 houses in places like North East Fife and across the rest of Scotland will be affected; further understands that this will mean more than a quarter of homes in Scotland will be impacted by this proposed rise on top of any yearly increase that is decided by local authorities; considers that this proposal may cause concern to many people living in band E to H properties, who, during a cost of living crisis, it believes are already faced with expensive energy bills, high levels of inflation and rising mortgage rates; notes the belief that these proposals do not go as far as previous commitments by the Scottish Government to scrap Council Tax in its entirety, and further notes the calls for MSPs to commit to scrutinising any proposals that result from the consultation fully and robustly.

17:11

**Willie Rennie (North East Fife) (LD):** I do not think that I have ever seen Scottish National Party members vacate the chamber as quickly as they have done today. Perhaps that is because it is 16 years since the solemn manifesto promise was made—16 years of full control over local government taxation; 16 years of talk about reform; 16 years of consultations, working groups, cross-party talks, think tanks and rhetoric—and 16 years of waiting for the abolition of council tax.

**Ben Macpherson (Edinburgh Northern and Leith) (SNP):** Will the member give way?

**Willie Rennie:** I will not, just now.

Nicola Sturgeon and Alex Salmond told us repeatedly that council tax was unfair and discredited and that they would certainly abolish it, but the SNP Government has morphed from reformers to defenders—defenders of the unfair, discredited council tax.

**Ben Macpherson:** Will the member give way?

**Willie Rennie:** I will not, just now.

First, the SNP promised to abolish council tax and then froze it. Now, it is hiking council tax with the biggest rises ever. The SNP Government plans to increase charges in band E by 7.5 per cent, in band F by 12.5 per cent, in band G by 17.5 per cent and in band H by 22.5 per cent. On the basis of current council tax rates, that would mean average annual increases of about £139,

£288, £485 and £781 per dwelling, which would be in addition to any inflation increase. That would mean the biggest hikes ever, during a cost of living crisis.

Now, after years of waiting, the SNP is suddenly in a rush—it wants the changes in by April. I encourage anyone who has not yet responded to the consultation to make their views known through the Scottish Government's website by the consultation deadline, which is tomorrow.

One person who has responded emailed me today. He said:

"My wife and I both work in nursing and emergency services and have three children.

We work hard and are currently in band F.

Already, we've had several increases to council tax ... we already pay more tax compared to those in England and quite simply with the cost of living crisis we cannot afford another increase ... The proposal penalises families who have worked hard to buy a family home and those with several children."

If the minister is not going to listen to me, he should certainly listen to my constituent.

Higher-income households are more likely to live in properties that are in bands E to H, but a sizeable share of lower-income households also live in such homes. That means that some people on lower incomes pay some of the highest council tax rates. In contrast, more than a third of the homes that are occupied by the richest 10 per cent of people are in bands A to D; people with some of the highest incomes in Scotland are paying the lowest levels of council tax.

What also makes the system unfair is that it is based on property valuations that were undertaken in 1991. A system that relies on three-decades-old property valuations can no longer be accepted. I will finish this point and then bring in Mr Macpherson, because he is relevant to my next section.

A constituent told me yesterday that it seems crazy that people can carry out major work on their property that increases the house size, but until they sell, they are charged at the old rateable value. With the outdated valuations and its crude targeting of wealth and income, the system continues to be as unfair as it was in 2007.

**Ben Macpherson:** I recall previous discussions that we have had on the system. The member has talked about the revaluation that many people aspire to. Does he agree that it is important for us as a Parliament to get to a shared position before the 2026 election, so that we can get a mandate from the people of Scotland for a revaluation and for change? That is what is required; otherwise, the issue will be just a political football.

**The Deputy Presiding Officer:** Willie Rennie, I can give you the time back.

**Willie Rennie:** That is a timely intervention, because the next part of my speech is about exactly that issue. I have wasted so many hours of my life sitting in cross-party talks about reform. Mr Macpherson was one of the ministers, so he will know part of the story, which would go like this: the minister would say earnestly that the Government was serious about change and would tell us that their ears were wide open, and that they were listening to all the other parties and their ideas; we would set out our plans; the minister, as Mr Macpherson will remember, would thank us profusely, saying that they would take away our ideas for analysis and discussion at a future meeting; then there would be a reshuffle and a new minister would arrive, who would tell us very earnestly—in fact, more earnestly than the previous minister—that they would listen, too, and the whole exercise would start all over again, just in time for the next minister to arrive. And so on. Not once did one of those ministers set out their plans for abolition of the council tax.

Next, the SNP Government's latest wheeze arrived—the citizens assembly, which was promised by the grandly titled Bute house agreement. Two years on from that agreement, there is still no sign of the assembly. The citizens have been ignored before they have even taken their seats in the assembly. The SNP has not broken its abolition promise from 16 years ago, but with these proposals it has undermined the Bute house agreement that it reached with the Greens.

So much for the grand talk from the Greens of a participative democracy—I am surprised that they are not here. They should be standing up to the SNP to defend democracy, not meekly following in its footsteps. From the various working groups, consultations, talks and now the assembly, it is almost as if the SNP never had any intention of doing something serious about proper reform.

We have been clear about what we want to see, and Mr Macpherson has heard that. For some years we have made the case for land value taxation—a new tax on the value of land rather than the infrastructure on it. That is what we propose. The Scottish Land Commission says that land is the most valuable asset in the UK. Oxfam says that taxing it could address rising inequalities while reducing the role of land assets in the accumulation of wealth.

However, that is not what the debate is about. It is about the reforms that the SNP proposes, which are well short of abolition and instead entrench the current system. We want the SNP to stop footling around, scrap the tax hikes and deliver the promise that was made 16 years ago.

**The Deputy Presiding Officer:** We move to the open debate.

17:19

**John Mason (Glasgow Shettleston) (SNP):** I thank Willie Rennie for bringing the debate to the chamber.

My starting point is that this country, be that Scotland or the United Kingdom, is not raising enough in taxation for the public services that we want and need. Other major European countries have a higher ratio of tax to gross domestic product, of about 7 per cent, so I argue that we should be looking more to the European model of realistic tax levels rather than the UK model of low taxes and poorer public services.

The next question is how to raise more tax. It might take six years or so to set up and introduce new taxes—as we heard at the Finance and Public Administration Committee this morning—and we would probably need Westminster's agreement, so our options for raising tax and protecting public expenditure are limited. Tweaking existing taxes is, therefore, the obvious thing to do in the short term. We have done that with income tax, to a fair extent, so council tax has to be another option.

**Michael Marra (North East Scotland) (Lab):** Would the member agree, in reflecting on the evidence that we heard at this morning's committee, that the Fraser of Allander Institute has made it clear that, essentially, it does not want to see more such proposals until this Government can actually bring itself to reform the council tax, as a property-based tax on a form of wealth? The Fraser of Allander Institute, in its submission to the committee, essentially said, "Do that first, and show us that you have the ability and the political will to make it happen."

**The Deputy Presiding Officer:** I can give you the time back, Mr Mason.

**John Mason:** I will touch on that, but I note that one of the reasons that the council tax has not been changed so far is that there has not been agreement in the Parliament. Ideally, most, if not all, of the parties would agree that we should use either LVT, as Mr Rennie suggested, a local income tax or a property tax. It would not be a very wise route to go down for the minority SNP Government to try to impose its view.

As has been said, council tax replaced the community charge or, as it was known, the poll tax, which did not even pretend to be progressive. However, council tax is not progressive by most definitions. In the area where I live, most properties are in band B, being valued at around £75,000, whereas a property that costs 10 times

as much, at £750,000, would be in band H. Even with the proposed change, if it were to go right up to band H, the latter household would pay less than four times as much council tax as the former for a property that was worth 10 times as much. Even with the changes, therefore, council tax would remain regressive. I therefore very much support the proposal to change the top bands and make the system a bit fairer and a bit better.

Willie Rennie suggested that during the cost of living crisis is not the right time to do that. However, it is because of the cost of living crisis that we need to do something like it now. We face a fairly stark choice: either we raise more in revenues, or we have to make serious cuts to local government and other funding and expenditure.

Willie Rennie probably understands that, but it is disappointing that he did not mention that if these proposals do not go ahead, there will be cuts to local services.

**Stephen Kerr (Central Scotland) (Con):** Would John Mason agree that it would perhaps be a good idea for the Scottish Government to look at efficiency savings? Does he agree that efficiency savings might have a place in the Scottish Government's financial planning?

**John Mason:** If the member had been watching the Finance and Public Administration Committee this morning, he would know—Liz Smith will be able to update him—that we have been looking at public service reform. We absolutely should look at that, and there is a whole range of suggestions in that regard. However, we will have to do something for the 2024-25 budget, and we are probably not going to make much out of efficiency savings by changing the public sector before then.

Moving on to council tax more generally, the fact that we are still using 1991 valuations is clearly a major disadvantage. As Willie Rennie said, people do not understand the current system and it is inherently unfair. Again, we heard at the Finance and Public Administration Committee this morning that it is reckoned that 50 per cent of properties in England are in the wrong band—some are rated too low and some are rated too high.

I do not think that we have the equivalent figures for Scotland, but it is clear that some properties in Scotland have risen in value much more than others since 1991, so a revaluation would at least make things fairer. I realise that such a revaluation could, and will, be unpopular with those who would pay more, but we cannot put it off forever. Either we need a revaluation, or we need a new tax.

As the motion notes, we all wanted to replace council tax some time ago; the problem is that we have not got any agreement as to what a replacement tax should be. The SNP's previous intention of having a local income tax is probably

not practicable and would not be operated by HM Revenue and Customs.

Land valuation tax is not well understood, and there are potential major drawbacks with regard to properties such as former council housing with very large gardens. My personal preference is probably for a property tax based on current value. If someone has limited income but lives in a high-value property, it should be possible to roll over the tax liability until the property is disposed of.

The motion is a bit inconsistent. It suggests that the proposals go too far, and at the same time it says that it wants changes to go further by replacing council tax. The Liberal Democrats need to decide what they want. Do they want a more progressive system or do they not? Do they want to protect public services or do they not?

All in all, therefore, I do not support Willie Rennie's motion. I look forward to the results of the consultation and what will come from that.

17:25

**Liz Smith (Mid Scotland and Fife) (Con):** I greatly welcome the debate. Willie Rennie was absolutely spot on in what he said, and I enjoyed his humour in relation to the U-turns on council tax and other policies that the SNP has undertaken in recent years.

However, the reason why I am pleased to take part in the debate is that there is no doubt whatsoever that the proposed council tax rises are a huge issue, certainly in the constituency of Mid Scotland and Fife that I represent, but also across Scotland. The proposals come at a time when people in Scotland are already being asked to pay higher income tax, and when more people, because of fiscal drag, are being taken into higher rates. The SNP-Greens have also been talking about a wealth tax that they would try to levy on a local basis. The proposals could not be anything but the worst possible news for so many people across Scotland.

Willie Rennie is absolutely right to set out the statistics on the difficulties that the rises will place on so many people. I think that when the consultation finishes tomorrow, and we see the results, the Scottish Government is going to get a big shock when it finds out just how deeply unpopular the whole thing is.

Mr Mason mentioned the Finance and Public Administration Committee. He is absolutely right about some of the warnings that we have been getting in committee about raising more tax while avoiding the burden of that tax having serious implications on behaviour.

The Scottish Government seems to be suggesting that it will try to exempt some of the

low-income properties in the higher bands from the proposed increase. However, that does not fit with the facts on the ground. In fact, there are something like 108,000 households among the poorest 30 per cent of Scots who live in properties in band E or above, and just 23,000 of those households currently receive a council tax reduction. That leaves between 80,000 and 85,000 households that are vulnerable to the proposed increase, which is a huge number of people.

As I said, that comes at a time when the SNP-Greens are talking about very considerable increases to the tax burden in Scotland. Not only does that have considerable implications for the households that are being asked to pay the tax; but the whole prospect is just so complex that it will turn out to be unworkable. As both Willie Rennie and John Mason rightly said, it is simply inconceivable that we could be going ahead with these proposals based on property ratings from 1991. That does not make any sense whatsoever.

As we know, both the National Audit Office and Reform Scotland have called on the Scottish Government to finalise a new deal for local government. There is some good in the idea of setting up a new partnership agreement with councils that supports collaboration alongside a fiscal framework for local government. I have a lot of sympathy with that ambition, but it would have to be on a three-year, or perhaps five-year, basis to ensure that there is sustainable funding and greater financial flexibility and transparency. There is no doubt whatsoever that local authorities across Scotland have been suffering really badly because of the consistent cuts that they have had to put up with for a long period of time, and they feel so vulnerable in the face of all the proposed changes.

In conclusion, we have here yet another SNP proposal that is ill thought through. I really do not think that the Scottish Government has thought about the ramifications of the policy; it has certainly not thought carefully about who is actually going to end up paying. I think that when the consultation results come out, the Scottish Government will have to have a major rethink.

17:29

**Michael Marra (North East Scotland) (Lab):** I thank Willie Rennie for securing the debate. Scottish Labour shares his frustration at 16 years of SNP failed promises on council tax. People in the Parliament with longer stripes than me have been over the issue on many occasions, and the Government has been found wanting, so a level of cynicism has been brought to the conversation. That is perhaps slightly unfair on the current

minister and even on his predecessor, but it has been a hard conversation.

As colleagues have mentioned, a panel of academics appeared before the Finance and Public Administration Committee this morning. They were candid in their assessment of the glacial pace at which any changes on council tax have taken place. They used the word “ludicrous” in relation to the fact that the proposals are being put forward using 1991 valuations.

**Ben Macpherson:** Will the member give way?

**Michael Marra:** I will make some progress then perhaps bring Mr Macpherson back in.

In its response to the consultation, Reform Scotland described the proposals as

“little more than tinkering round the edges”—

rightly so, because the consultation has, frankly, proposed a mere rehash of 2017 increases. That comes from a Government that is not, and never has been, genuinely interested in the hard work of reform, whether it be of our taxes or our public services.

This is, predictably, a mess of the SNP’s own making. Its council tax freeze starved local government of resource for a decade, leaving councils hobbled and services in decline, workers underpaid and citizens increasingly at risk. Of course, the policy worked well for its election prospects, but let us not pretend that it was progressive. A further freeze was dangled as an incentive in early 2021, only to be abandoned later that year. It is pretty clear that nationalist populism as pursued by the SNP has real consequences.

In the worst cost of living crisis in decades, the SNP is now asking ordinary households to pick up the bill, which beggars belief. During the Finance and Public Administration Committee’s recent visit to Largs for an evidence-gathering session as part of our pre-budget scrutiny, I chaired a group of community activists, and they were apoplectic at the very thought of paying more council tax at this time.

Scottish Labour’s analysis estimates that up to 85,000 low-income households could be hit by the SNP’s proposals. Liz Smith and Willie Rennie have set out quite clearly the inequity of the proposals, and those 85,000 low-income households will feel the brunt of them. We need a Government that is honest about the mess that it has made and what it will do about it.

The amount of money that might be raised by those council tax variations is £175 million, I believe. That is before—again, this was set out at the Finance and Public Administration Committee’s meeting this morning—any adjustments are made regarding lower fixed-

income households or councils that might lose out disproportionately on the budget as a result of the banding of households in their areas. I remind the chamber that the black hole is £1.9 billion.

Of late, the SNP has made much noise about a range of new taxes, including a wealth tax. The witnesses at the finance committee all agreed that introducing a new tax is a long and complex process. The example was given of a social security benefit taking up to six years to establish, but we should reflect on the fact that that is a benefit rather than a tax, and the willing participation of citizens in providing the information that is required is more likely for the former rather than the latter.

However, given that the SNP has already taken 16 years to not reform council tax—a tax that already exists—the Fraser of Allander Institute has been very clear that it is deeply sceptical about this Government’s capacity to introduce and successfully administer an entirely new tax timeously enough to address the £1.9 billion black hole that the SNP has created in our public finances.

Whether it be council tax, income tax or the distant prospect of a wealth tax, the SNP cannot tax its way out of the mess that it has made, and the people of Scotland will not bail it out this time.

17:34

**Stephen Kerr (Central Scotland) (Con):** Michael Marra is right, of course: the nationalist populism that we have been exposed to for the past 16 years has now well and truly hit the buffers.

I was a little surprised by my friend Willie Rennie being so surprised that the only thing that the SNP has left in the locker is higher taxes, because that is the SNP Government’s characteristic—it reaches for higher taxes. Its approach is not to talk about efficiencies or savings that can be made in Government; it is there to be seen. The public know that this Government reaches for more taxes, higher taxes and different taxes.

There are incredible tax burdens on the people of Scotland, and then the Government wonders why, when net migration in this country for the past two years will be greater than 1.2 million, people with skills who can make a contribution to our country do not come. Perhaps we need to look at ourselves. The Scottish Government and its ministers have completely run out of ideas now. The Government is not even running on fumes any more when it comes to ideas.

**John Mason:** Does the member agree with my point that the UK, including Scotland, is paying

proportionately less of its gross domestic product in tax than other European countries?

**Stephen Kerr:** As a Conservative, I am embarrassed to say that this country has the highest tax burden in 80 years. That is not a recipe for economic growth and prosperity. It is a recipe for the very opposite of what I think we all want to see in our country, which is economic growth, prosperity and shared prosperity.

The council tax provides 19 per cent of council funding. It raises £2.6 billion to pay for services at the local level. However, it should be emphasised that councils right across Scotland are now having to deal with the toughest set of budget decisions that they have ever had to make. That rests on the back of the failure of the SNP Scottish Government, which has been in government for 16 years, and which has centralised and ring fenced to its heart's content. That is all coming home to roost, because the councils that the Government has deliberately and by design underfunded and defunded for the past decade are now struggling to cover the cost of basic services.

Falkirk, in my constituency, has seen dramatic reductions in the number of vital bus services, the closure of swimming pools and charges for the removal of garden waste going up. Many local authorities in Scotland are at risk of bankruptcy. Indeed, many of them have already started to spend their reserves on current expenditure, which means that they are approaching insolvency. Let us be clear: there will be no section 114 order, as there is in Birmingham. There will be no appointment of commissioners, because the legislation in Scotland does not allow for that. Let us therefore hear no self-congratulation or back slapping about the health of local government that is born from ignorance of Scotland's legislation. The starving of local government of resources has been a feature and principal plank of the Government's approach to local democracy.

The Government has so many allegedly bright ideas for which it provides no funding. It expects them all to be carried out without any idea of how much they will cost or who will pay for them. Whether it be a bairns' hoose or 1,000 extra childminders, these national commitments made by nationalist ministers are plonked on the doorsteps of local councils with no money to pay for anything.

And so to the reform—as it is laughingly called—of council tax. Trying to squeeze ever higher amounts of money out of people who already pay more than their fair share has no justification. It is tinkering—

**Ben Macpherson:** Will the member take an intervention?

**Stephen Kerr:** Yes, if I am allowed.

**The Deputy Presiding Officer:** Ben Macpherson may come in briefly.

**Ben Macpherson:** I hope that I have come in at the right juncture in Mr Kerr's speech. I have a question that is similar to the one that I asked of Mr Rennie. The Conservative Party did not participate in consideration of reform of the council tax previously. Will it be open minded about that ahead of the 2026 election so that we can take a shared position across the parties?

**Stephen Kerr:** The Conservative Party is continuously reviewing our policies on how we raise money to fund local government. We will, of course, be willing participants in any discussions in the Parliament and in any cross-party setting to that end. However, although I have a lot of respect for Ben Macpherson, I would not want him to think that what has not happened in the past 16 years under his Government will suddenly happen in the lead up to the deadline that he suggests we all work towards.

I am getting the signal from the Presiding Officer that I have gone over my time. I make a plea to the minister to start the process of real local government reform at root and branch. Let us face the reality that local government in our country is in decline, local democracy is struggling and services are at breaking point. The system needs reform, not another tinkering attempt at making thinly disguised tax increases.

**The Deputy Presiding Officer:** Thank you, Mr Kerr; I was trying to be as discreet as possible in telling you that your time was up. I call Tom Arthur to respond to the debate.

17:40

**The Minister for Community Wealth and Public Finance (Tom Arthur):** I thank Willie Rennie and congratulate him on securing the debate. I also thank all members for their contributions.

The debate has been very useful in giving people the opportunity to air their views. I reiterate Willie Rennie's point and encourage anyone who has not yet responded to the consultation to do so tomorrow. I express my thanks and sincere gratitude to all who have responded to the consultation to date, and I thank those members who have written to me expressing views that have been shared with them by their constituents. That is the purpose of the consultation; it is an opportunity to seek views. I stress that it is a joint consultation with local government—it has a mandate from the Convention of Scottish Local Authorities as well as the Scottish Government.

It is the second consultation that we have undertaken that looks at aspects of reform of the

existing system of council tax. Previously, we had a consultation on the premiums that could be charged for second properties, and we have announced in the programme for government that we will be taking forward that power to allow local authorities discretion to charge a premium of up to 100 per cent on second homes. That reflects the nature of the origin of this work, which is the joint working group on sources of local government funding—

**Jackie Baillie (Dumbarton) (Lab):** Will the minister take an intervention?

**Tom Arthur:** One moment, please; I will just make this point. That reflects the origin of the consultation, which is the joint working group on sources of local government funding and council tax reform. To provide some context, there are two aspects to the work. The first is to look at what meaningful changes we can make to the existing system of council tax through things that can be achieved in the short term. The second aspect, which includes the element of working with deliberative processes to engage more of the public, will involve looking at, potentially, more fundamental reform or replacement of the council tax.

Before I give way to Ms Baillie, I want to be clear that the consultation that is being undertaken at the moment is, for the next 24 hours or so, a live consultation. I assure anyone who has responded to or taken an interest in the consultation, and all members in the chamber, that no decisions have been taken. We will carefully reflect on the responses and the third-party analysis that is undertaken.

**Jackie Baillie:** The benefit of being around for a long time is that I remember things. I remember that Marco Biagi, who was local government minister between 2014 and 2016, set up a commission on local government finance. It was cross-party—indeed, I served on it. We came up with solutions that the Scottish Government then published in a glossy report. Why did the SNP bottle it and fail to deliver change?

**Tom Arthur:** As Jackie Baillie has a long memory, I am sure that she will recall the commission and the review of council tax that was undertaken in the dying days of the Labour-Liberal Democrat Administration, the report of which was rejected prior to its publication.

On the specific point about the local government commission, it did not settle on a specific replacement for council tax. We had an election in 2016, and I recall that, in March 2016, a press release from the Labour Party, in Jackie Baillie's name, said exactly what Jackie Baillie said a few moments ago. There was an election, manifestos were set out and the people of Scotland made

their views clear in that election, and we delivered on what we set out that we would do with regard to council tax in the previous session of Parliament. My predecessor as public finance minister, Ben Macpherson, had been engaged in cross-party talks and engagement, which were interrupted by the pandemic. That is the history of how we got to this particular set of circumstances.

In looking to the future, we are taking a joint approach with local government. That is important because, in looking at local sources of funding and local taxation, we have to come to a shared position with local government—what we do needs to be done with local government. That is why it is so important that we go through the process of the joint working group.

It is also important not to see this in isolation—the consultation is part of a wider series of work that has been undertaken by the joint working group. There is also the introduction of the Visitor Levy (Scotland) Bill, which would represent probably the greatest fiscal empowerment of local government since devolution, and we are committed to engaging deliberatively with the wider public as we take that work forward. As I have said on previous occasions, my door is always open to engaging with any member on local taxation matters or any other matter that falls within my portfolio of responsibilities.

Mr Kerr touched on local governance and the reform of local government. I was very pleased to launch, along with my colleague Mr FitzPatrick, the second stage of the local governance review with COSLA last month, and that work is now being undertaken across Scotland.

We are also continuing our review of the Community Empowerment (Scotland) Act 2015; we will be publishing our analysis of the responses to the community wealth building consultation later in the autumn; and, of course, we are working to deliver the new deal through the Verity house agreement that we have agreed with local government and which includes the fiscal framework. A broad range of work is going on.

That said, what I think has been reflected in some of the contributions that we have heard in the chamber in the past hour or so is that there is no consensus on what significant reform or replacement of the council tax might look like. Members might offer various ideas, but we have not arrived at a consensus; indeed, Mr Macpherson made a very important point in that respect. I am committed to working in partnership with local government to identify a way forward and see whether we can build consensus through a recognition of the various views, challenges and opportunities as well as by fundamentally recognising the significant contribution that council tax makes towards vital public services.



**Liz Smith:** There are really two issues here: first, how the money that the minister claims is necessary is raised; and secondly, reforming the council tax to ensure that it is more efficient in the future. I have to say that I am very glad to hear that nothing has been decided, because I think that, when the results come in, there will be quite a considerable amount of criticism about the proposals. With hindsight, does the minister accept that it was not a sensible idea to freeze council tax for such a long period? Did it not take away councils' ability to pull in the money that they needed at an earlier stage, which would have avoided some of the difficulties that we have just now?

**The Deputy Presiding Officer:** I can give you the time back, minister.

**Tom Arthur:** There has to be a recognition of the prospectus on which the Government was elected in 2011. Indeed, it was also the Labour Party position in the 2011 election, which it was thought it was in contention to win until quite late on; it, too, set out a proposal for a council tax freeze. Ultimately, such proposals reflected a time of recession and significant economic hardship as we came out of the great financial crash. One of the few powers that we had at our disposal through the taxation system to support communities and individual households was the ability to freeze council tax, and that was what was implemented. Of course, councils have been able to vary the council tax rate since 2016 and have had full discretion in that respect since the most recent budget.

I am at the end of my time, but I reiterate that the consultation is still live and that no decisions have been taken. I am grateful to those who have responded already, and I encourage anyone with an interest in this subject who has not yet responded to do so.

**The Deputy Presiding Officer:** That concludes the debate.

*Meeting closed at 17:48.*



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