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Thursday 9 October 2025

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Scottish Parliament

Thursday 9 October 2025

[The Presiding Officer opened the meeting at 11:40]

General Question Time

The Presiding Officer (Alison Johnstone): Good morning. The first item of business is general question time.

Strathclyde Partnership for Transport (Bus Franchising)

1. Katy Clark (West Scotland) (Lab): To ask the Scottish Government what its response is to the decision by Strathclyde Partnership for Transport to progress with proposals for bus franchising. (S6O-05042)

The Minister for Agriculture and Connectivity (Jim Fairlie): We very much welcome the work that Strathclyde Partnership for Transport has undertaken to update its regional bus strategy, given the importance of the bus sector to its region. It is right that local transport authorities explore how best to use the measures in the Transport (Scotland) Act 2019, as our approach is to enable them to determine what is best to improve their services. Transport Scotland will continue to engage with all stakeholders, including SPT.

Work on the franchising guidance is on-going. We will be sharing it with the Net Zero, Energy and Transport Committee, along with the affected parties, prior to its finalisation and formal publication.

Katy Clark: Since 2006, there has been a 44 per cent decrease in the number of bus routes across Scotland, and 190 routes have been cut in the past year alone. More than 83 per cent of passengers support the idea of Strathclyde Partnership for Transport implementing bus franchising across the region, which would allow for better oversight of fares, routes and timetables. What work is the Scottish Government doing to ensure that SPT has the necessary financial support to enable it to proceed with franchising?

Jim Fairlie: The Scottish Government continues to work with SPT, as I said in my original answer. We have to go through a number of phases. Once the guidance is cleared, we will present it to the Net Zero, Energy and Transport Committee. After that, it will be up to SPT to come back to us to talk about what it needs to do next.

Jamie Hepburn (Cumbernauld and Kilsyth) (SNP): Many constituents are contacting me about

the decline in services that are offered by the main commercial bus operators in Cumbernauld and Kilsyth, which can mean that people need to travel for more than two hours to ensure that they are at their work in Glasgow by 9 am. What opportunities are presented by the new powers for local authorities that SPT can utilise to return to a more comprehensive bus network and promote public transport use?

Jim Fairlie: The bus powers under the Transport (Scotland) Act 2019 enable local transport authorities to determine the provision of services, the routes and frequency of services and the fare structures for services, as well as the types of vehicles that should be used on local roads. We want all local transport authorities to be able to improve their bus services, but it is for them to decide which powers, if any, are best to use to address the transport challenges in their areas.

Highland Main Line (Dualling and Electrification)

2. Ariane Burgess (Highlands and Islands) (Green): To ask the Scottish Government what scoping work it has undertaken regarding dualling and electrifying the Highland main line. (S6O-05043)

The Cabinet Secretary for Transport (Fiona Hyslop): Network Rail, instructed by Transport Scotland, has investigated options to electrify the Highland main line. That work contributed to developing our plans to replace ScotRail's intercity fleet, which I announced to Parliament in December 2024.

As I said in the debate that the member led last week, we are firmly committed to electrifying our railways. Projects that are already delivered or under way, such as those for Edinburgh to Glasgow, Barrhead and East Kilbride, and our recently announced plans for the phased electrification of the Fife and Borders routes, are evidence of that commitment.

A refreshed rail decarbonisation action plan will be published during this parliamentary session, which will specify how we are going to achieve phased decarbonisation of our rail network by 2045.

I appreciate that there are potential improvements to be secured by dualling the Highland main line, but no active projects for that are under way.

Ariane Burgess: My interest is in the Highland main line in particular. As long as 17 years ago, the Scottish Government promised rail passengers that it would cut journey times between Inverness and Perth by half an hour. In the intervening 17 years, just four minutes have been saved on that

route, because the Government has not prioritised rail in its spending. What will the cabinet secretary do to fulfil the promise that has been broken and provide speedy, reliable rail for people in the Highlands?

Fiona Hyslop: I think that the member is incorrect. Rail constitutes the vast bulk of my budget, compared with other modes of transport. Rail is funded with more than £1.5 billion a year, and trunk roads and their issues receive about £1 billion, so it is incorrect to characterise the Scottish Government's funding in that way. The extensive announcements that I have made on procurement and electrification have been welcomed, particularly in the Borders and Fife, and they are testament to our commitment to rail.

New House Building and Affordable Housing Supply

3. Mark Griffin (Central Scotland) (Lab): To ask the Scottish Government what its response is to the "Housing Statistics for Scotland Quarterly Update: New Housebuilding and Affordable Housing Supply to end June 2025". (S6O-05044)

The Cabinet Secretary for Housing (Màiri McAllan): The Scottish Government recognises the challenges that are set out in the latest housing statistics. That is why we have increased the 2025-26 housing budget to £808 million. We did that in September, when we doubled our funding for acquisitions to £80 million under the housing emergency action plan. That will help family homes to be acquired now to relieve evident pressure. We are also committing up to £4.9 billion over the coming four years, which is a major increase. An uptick in delivery will follow.

Mark Griffin: In 2018, Scotland saw 23,337 housing starts. This year, it is just 15,104, which is a 35 per cent collapse. Social sector starts are at their lowest level since 1997, when we started publishing the statistics. Since 2018, 3,435 more children have ended up in temporary accommodation and, tragically, 1,188 more people have died homeless.

How will the cabinet secretary and the Government reverse that devastating trend? Does the Government have a target date for ending the use of hotels and bed and breakfasts as temporary accommodation for children?

Màiri McAllan: The availability of temporary accommodation is a vital safety net under Scotland's housing and homelessness legislation, but it ought to be just that—it ought to be temporary.

The actions that we have taken to date—not least the delivery of 140,000 affordable homes since we came into government, more than 100,000 of which have been for social rent—have

meant that, in Scotland, we have access to 47 per cent more affordable homes per head than in England and 73 per cent more than in Wales. Despite that, Mark Griffin is right that there is considerable strain in the system. I do not want any children to spend longer in temporary accommodation than they need to. That is why, on 2 September, our housing emergency action plan committed to a number of actions to turn around that trend, including setting out multi-annual funding for affordable homes, record investment in affordable homes over the coming years and other changes, including changes to the planning system so that it facilitates the change that we are determined to see.

Rona Mackay (Strathkelvin and Bearsden) (SNP): Mark Griffin has some nerve to stand in the chamber and criticise the Scottish Government's action on tackling Scotland's housing emergency when the Labour Administration of 2003 to 2007 completed only a dismal six council homes and was lacking in crucial innovation and collaboration with local authorities. Will the cabinet secretary advise me how the Scottish Government's ambitious investment in voids and acquisitions will empower local authorities to replenish existing housing stock to create permanent homes for hundreds of families throughout Scotland?

Màiri McAllan: I very much welcome the question and the context. The new affordable homes that we have delivered since coming into government set us apart in the United Kingdom, but it is also important to put the stock that we have to better use.

Rona Mackay asks about voids and acquisitions. Since declaring a national housing emergency, we have brought almost 1,000 homes into affordable use through £40 million of targeted investments in acquisitions and through bringing social voids back into use. On 2 September, in the emergency plan that I mentioned, we doubled the fund for acquisitions to £80 million. We have asked councils to go out now to use that money to acquire homes that are on the market—family homes, which are needed to get children out of temporary accommodation—and relieve the pressure, and we will invest in home building at the same time.

Investment in Sport

4. Liz Smith (Mid Scotland and Fife) (Con): To ask the Scottish Government, in light of it being Scottish women and girls in sport week, what financial progress has been made against its 2021-22 programme for government commitment to double its investment in sport to £100 million by the end of the current parliamentary session. (S6O-05045)

The Minister for Drug and Alcohol Policy and Sport (Maree Todd): The Scottish Government's women and girls in sport week campaign aims to increase the visibility of women and girls in sport, highlight opportunities to get involved and discuss barriers and drivers to participation. The 2025-26 budget underlines our on-going commitment to sport and active living by protecting that investment, despite a challenging economic background. We recognise the significant impact that spending on sport and physical activity has on delivering health outcomes, and doubling the investment in sport and active living during this parliamentary session remains the Scottish Government's ambition.

Liz Smith: The minister will understand that the Scottish National Party's 2021 programme for government commitment to double the investment to £100 million substantially raised the hopes of sporting bodies, which have been struggling with resource issues for years. It is little wonder that they are aghast at seeing the figure of around £40 million in the revised autumn budget. Taking away the sportscotland spending of £35 million leaves just under £5 million for the active healthy lives programme. It is worse still when those bodies see that the £40 million figure is lower than the 2021-22 revised autumn budget figure of £44.5 million. Will SNP ministers honour their 2021 programme for government commitment?

Maree Todd: I assure Liz Smith and the Parliament as a whole that we meet sports governing bodies regularly and we recognise the challenging situation that they are facing, which is, frankly, worsened by some of the decisions that have been made at Westminster, such as those on employer national insurance contributions, which have added strain to a sector that, as Liz Smith acknowledges, was already in difficulty.

It remains our ambition to double that budget. We have one more Scottish Government budget to go before the end of this parliamentary session. I am very hopeful that, unlike last year, the Scottish Conservatives—who did not previously find it possible to vote for the investment in sport of nearly £50 million—will find it in their hearts not just to support the budget and maintain that investment but to negotiate to increase it. That would be great.

Patient Rights (Unfit-for-purpose Medical Centres)

5. Alex Rowley (Mid Scotland and Fife) (Lab): To ask the Scottish Government what rights patients have when their local medical centre has been deemed unfit for purpose by their national health service board. (S6O-05046)

The Cabinet Secretary for Health and Social Care (Neil Gray): NHS boards are responsible for

ensuring the provision of primary medical services in their area. My officials are working with all health boards to develop a whole-system NHS infrastructure investment plan. A key part of that plan will be the development of an investment strategy for primary care, which will consider both priorities and delivery models.

Spending on primary medical services by the Scottish Government has increased over the past decade, both in cash and in real terms. In cash terms, spending has gone from £763 million in 2013-14 to almost £1.1 billion in 2023-24.

Alex Rowley: According to NHS Fife,

"The Initial Agreement Document (IAD) was approved by Scottish Government in January 2020".

In 2021, the then health secretary, in answer to a question from Annabelle Ewing about Lochgelly, told the Parliament:

"I give the member an absolute confirmation that, when we have that outline business case, the funding will be found."—[*Official Report*, 28 October 2021; c 9.]

In early 2023, NHS Fife stated that the current Lochgelly and Kincardine health centres

"are older facilities which no longer meet the needs of the local populations."

Does the cabinet secretary understand the level of anger and despair in communities in Lochgelly and Kincardine, which have been promised time and again that they would have replacements for unfit-for-purpose health centres?

Neil Gray: I thank Alex Rowley for setting that out. Yes, I understand it, because I have met local residents in Lochgelly and Kincardine at the request of Ms Ewing and Ms Somerville, the constituency representatives, and the residents highlighted those concerns. We have a capital funding pause, except in the areas that have been set out in the budget, because of the pressure on our capital budget due to decisions that have been taken that are outwith our control and because of inflation in the construction sector. We are in touch with NHS Fife and all other health boards in order to get their capital priorities. We hope that the United Kingdom budget will provide greater capital investment to allow us to do more in the primary care system.

Annabelle Ewing (Cowdenbeath) (SNP): NHS Fife has just said that a new medical centre for Lochgelly will be in its top 3 priority projects for capital funding from the Scottish Government. Does the cabinet secretary agree that it must surely be Lochgelly's turn now?

Neil Gray: I very much appreciate the work that Annabelle Ewing has done to advance the case for the Lochgelly medical centre. I hear what she has said about NHS Fife's prioritisation. She will understand that the capital allocation will be

determined based on the allocation that we receive from the UK Government in the budget and the work that is being carried out regarding the spending review and the infrastructure investment plan. My wish is for much greater investment to go into the primary care services capital estate and for Lochgelly, Kincardine and other communities to see development happen.

Congestion Charging and Clyde Tunnel Toll (Glasgow)

6. Jackson Carlaw (Eastwood) (Con): To ask the Scottish Government what engagement it has had with Glasgow City Council regarding its proposals for an “at-city-boundary congestion charge” and a toll on the Clyde tunnel. (S6O-05047)

The Cabinet Secretary for Transport (Fiona Hyslop): The Scottish Government has not held specific discussions with Glasgow City Council regarding any potential at-city-boundary charge or regarding any toll charge to use the Clyde tunnel.

Jackson Carlaw: Perhaps the cabinet secretary might urgently do so, because my Eastwood constituents would be unfairly charged by the Scottish National Party-run council every time they crossed the local authority boundary by car for work, university, college, family or social reasons. For example, every time they went to the Queen Elizabeth university hospital for essential medical care, they would be charged for crossing the city boundary.

Moreover, if every other local authority followed suit, we would have, in effect, a series of custom posts all over Scotland, with people being charged every time they crossed a city or council boundary anywhere in Scotland. That would be a disaster for the economy and a completely unrealistic and unfair burden on motorists.

Fiona Hyslop: It was my understanding that the Conservatives wanted to have more decentralisation and more powers for councils—*[Interruption.]*

The Presiding Officer: Let us hear the cabinet secretary.

Fiona Hyslop: However, Jackson Carlaw now wants me to step in on an issue that should best be resolved by East Renfrewshire Council and Glasgow City Council. I remind him that there is existing legislation—the Transport (Scotland) Act 2001, which was introduced by the then Labour and Lib Dem Executive—on road user charging powers. It is up to local authorities to make decisions, and they want to manage their own road space, maintenance and congestion. If he does not believe that local authorities should be in charge of their own authorities, perhaps there are

even more divisions in the Conservative Party than we realised.

Rosyth to Dunkirk Proposed Ferry Route

7. Mark Ruskell (Mid Scotland and Fife) (Green): To ask the Scottish Government whether it will provide an update on the proposed ferry route between Rosyth and Dunkirk. (S6O-05048)

The Minister for Agriculture and Connectivity (Jim Fairlie): The Scottish Government continues to support the development of our ports and the potential for a new direct freight and passenger ferry service linking Scotland to Europe. Ministers and officials have met the sponsors on a number of occasions regarding their proposal to introduce a new ferry route between Rosyth and Dunkirk, and the Scottish Government continues to engage with the sponsors on a variety of issues.

As Mark Ruskell is aware, one obstacle is the border control post requirements, which were introduced due to the United Kingdom exiting the European Union. Although the Scottish Government welcomes the recent announcement of an outline sanitary and phytosanitary agreement between the UK and the EU, until the agreement is finalised, it is impossible for the Scottish Government to provide certainty about future border control post requirements. Officials continue to discuss those matters and others with the sponsors.

Mark Ruskell: The minister will be aware that, before the summer recess, the First Minister gave assurances that his Government would “welcome the ferry route” and do

“everything that we can to remove any obstacles that are in the way.”—*[Official Report, 5 June 2025; c 20.]*

Four months on, the biggest barrier remains the border control post designation. I believe that that is resolvable. The ferry route is a significant opportunity for the local community, the Scottish economy and our connection to Europe. How will the Government support the delivery of the ferry route in the coming months? Time is ticking away; we will lose the ferry route and the direct connection to Europe. We cannot afford to lose this opportunity, and I think that the First Minister knows that, too.

Jim Fairlie: Mark Ruskell makes light of the issue of border control posts, but he should not do so, because of the job that they do in preserving Scotland’s public health and animal health. The Scottish Government remains absolutely convinced that Scotland’s future is best served by being in the EU, and we remain committed to seeking to achieve that. Improving our transport and trade links with the European mainland is even more important and has even more

resonance after the UK's damaging exit from the EU.

As I said, although the Scottish Government welcomes the recent announcement about an SPS agreement between the UK and the EU, until an agreement is finalised, it is not possible to confirm what future border control post requirements will be. Scottish Government officials continue to liaise with the sponsors, and I have asked for a meeting directly with the sponsors.

First Minister's Question Time

12:00

"A Fresh Start with Independence"

1. Russell Findlay (West Scotland) (Con): Yesterday, John Swinney launched yet another taxpayer-funded paper on independence. He has called it a fresh start. *[Interruption.]*

The Presiding Officer (Alison Johnstone): Let us hear Mr Findlay.

Russell Findlay: They will not be clapping in a minute.

The same John Swinney has dreamed about breaking up the United Kingdom for almost 50 years. He was at the forefront of the free by 93 campaign. He first became leader of the Scottish National Party at the turn of the millennium. In 2014, he played a crucial role in the—losing—yes campaign. Thank you, John. Last year, he became SNP leader again. He really thinks that it is plausible to describe his latest independence paper as a fresh start. Is John Swinney having a laugh?

The Presiding Officer: Use full names at all times, please.

The First Minister (John Swinney): Before I respond to Mr Findlay, I want to take a moment to welcome the news that Israel and Hamas have agreed the first phase of a peace plan for Gaza. I call for all sides to abide by the terms of the agreement, for the release of all hostages and for the immediate entry of humanitarian aid into Gaza. I know that, after more than two years of devastating brutality and loss of life, this will be a moment of relief for many here, in Scotland, and around the world. I reiterate my call that Palestinians and Israelis must be able to live safely side by side, based on a two-state solution. I dearly hope that this is the first step towards that outcome, and I express my thanks to all the mediators who have worked so hard to create this moment and this opportunity for peace. *[Applause.]*

In relation to Mr Findlay's substantive question, I am deadly serious about the argument for Scottish independence. As a country, we have exercised self-government since 1999, with the establishment of this Parliament. A number of significant benefits have been achieved for the people of Scotland. Some of those, such as the ban on smoking in public places and the introduction of free personal care, were delivered by the previous Government and some of them were delivered by my Government—including the abolition of tuition fees, minimum unit pricing for

alcohol and the introduction of the Scottish child payment.

We are at a moment now, in Scotland, when the rightward drift of the United Kingdom and the stagnation of living standards in our country demonstrate a need to re-examine the argument. That is why independence is the fresh start that Scotland needs.

Russell Findlay: The fact that he says that he is deadly serious is actually even more worrying than if he had just been having a laugh. John Swinney cannot offer a fresh start, because he has been in the SNP Government for almost 20 years. He was Nicola Sturgeon's and Alex Salmond's right-hand man. He was up to his neck in every SNP scandal: ferries, gender self-identification, Scottish Qualifications Authority exams, named persons and many more. He ran down Scotland's economy and then he ran down Scotland's education system.

A new survey shows that public trust in the Scottish Government is at an all-time low—and it is a Scottish Government survey. Does John Swinney accept that that is a damning judgment of his dismal record?

The First Minister: What my Government is focused on is improving the lives of people in Scotland. That is why we are keeping prescriptions free in Scotland while they are nearly £10 under Labour in England; it is why we are protecting free tuition in Scotland while fees are rising south of the border; it is why we have expanded free early learning and childcare, extended free school meals, introduced the Scottish child payment and abolished—for good—peak rail fares on our railways. We are interested in providing practical support to improve the lives of people in Scotland, and we will continue to do that.

I notice that, in the survey that Mr Findlay is talking about, there is also a question on independence. It indicates that support for independence is at 47 per cent—up from 27 per cent in 1999. *[Interruption.]*

The Presiding Officer: Thank you, members.

The First Minister: I can see the direction of travel in Scotland—it is going towards independence.

Russell Findlay: Nicola Sturgeon's book should be in the fiction section, but John Swinney's paper should really be in the fantasy section. It is not just harmless fantasy but dangerous dishonesty. This graph here, from his paper, says that Scotland's gross domestic product has grown faster than that of the rest of the UK when the opposite is true.

Serious and credible experts have demolished the Government's 90-page exercise in wishful

thinking. Leading economist Professor Ronald MacDonald said that John Swinney's plans were "totally shambolic" and that they would have "a devastating effect". He expressed astonishment at the "total ignorance" of the SNP's currency position. Damningly, he said that all of that would impact on public sector wages, pensions, mortgages and borrowing costs for homes and businesses. *[Interruption.]*

The Presiding Officer: Let us hear Mr Findlay.

Russell Findlay: John Swinney's paper offers no solutions. It does nothing to help people's lives here and now. It is an outrage that it was produced by Scottish civil servants. Will John Swinney stop wasting taxpayers' money on such nonsense?

The First Minister: Under the SNP Government, GDP per person has grown by 10.3 per cent in Scotland compared with 6.1 per cent in the UK, while productivity has grown at an average rate of 1.1 per cent per year in Scotland compared with the UK average of 0.4 per cent. That demonstrates that the point that Mr Findlay has put to Parliament is not correct. *[Interruption.]*

The Presiding Officer: Let us hear the First Minister.

The First Minister: The issue that Mr Findlay must address is that the arguments that he puts forward for preserving the status quo are now completely and utterly threadbare. Labour and Tory politicians said that staying in the United Kingdom would lower our bills, but the opposite has been the case. They promised financial security but gave us the Liz Truss mini-budget. They assured us that voting no was the surest way for Scotland to remain in the European Union, but Scotland has been taken out of the EU against our will. The arguments against Scottish independence have collapsed since 2014, and Scotland is on a pathway to independence.

Russell Findlay: John Swinney's graph on GDP is wrong, just as the stats that he gave last week on income tax were wrong. If he ever got his way, it would mean extreme tax rises and severe spending cuts for Scotland. Mortgages would go up, pensions would be put at risk and there would be a hard border with England. Scotland would be divided and would be smaller and weaker.

Despite all of that, John Swinney keeps obsessing about independence, which would make Scots poorer. It is no wonder that public trust in the SNP is at an all-time low. *[Interruption.]*

The Presiding Officer: Let us hear one another.

Russell Findlay: John Swinney is not a fresh start. He is a tired nationalist with a dismal record. He is not focused on building a strong economy for the future. He is wasting time and taxpayers'

money on the same old arguments of the past. For the sake of Scotland, is he ever going to give up on his independence obsession and move on?

The First Minister: It is pretty clear to any member of the public watching this exchange that the more Russell Findlay gets personally insulting to his political rivals—*[Interruption.]*

The Presiding Officer: Let us all hear one another.

The First Minister: —the weaker his arguments become. What I have marshalled and put in front of Parliament today is the evidence. Living standards in Scotland are stagnating, and they have stagnated for 15 years. *[Interruption.]*

The Presiding Officer: It is becoming increasingly difficult to hear one another. I ask members who have not been called to speak to please resist the temptation to do so. I am sure that the people who are gathered in the gallery would wish to hear contributions.

The First Minister: Living standards in Scotland, as part of the United Kingdom, have ground to a halt. Brexit has been a disaster. The implications of the Liz Truss mini-budget have wreaked economic difficulty and havoc on the people of the UK, and Scotland has been saddled with that, despite the promises of lower prices, lower bills and access to the European Union that were made by the no campaign in 2014.

I am very proud to lead a campaign that is about focusing on improving living standards in Scotland and transforming the lives of the people of Scotland, and we will do that through independence.

Drug Deaths

2. Anas Sarwar (Glasgow) (Lab): I, too, welcome the agreement on a Gaza ceasefire, the end of the bloodshed and the release of hostages. The ceasefire must be real and it needs to last. However, it must also be backed up by an urgent surge in delivery of aid into Gaza and a meaningful pathway towards an end to the illegal occupation and a lasting peace in which every life—whether it be Palestinian or Israeli—is treated as equal.

Today, members will vote on the Right to Addiction Recovery (Scotland) Bill at stage 1. Scottish Labour will support the bill. Six years ago, the Scottish National Party declared a drug deaths emergency. However, six years on, lives are still being lost, families are still grieving and a generation has been failed. In the first six months of this year alone, 607 people died from suspected drug overdoses—that is one life lost every seven hours.

When it comes to recovery, the picture is just as bleak. The SNP has not delivered the promised rehabilitation beds. Even more shamefully, 77 per cent of areas report being unable to access rehab spaces because they do not have the money that they need from the SNP Government. Rehab beds are lying empty in the middle of a drug deaths emergency. Six years into this emergency, why are beds being left empty, and why are Scots not getting the treatment that they need if they are to recover?

The First Minister (John Swinney): I recognise both the importance of drugs support for individuals and the need to deliver on the commitments that we made as part of the programme for government.

On the specific issue that Mr Sarwar raises, we made a commitment to establish 1,000 publicly funded residential rehabilitation placements per year by 2025-26. The most recent Public Health Scotland publication shows that there were 984 confirmed records of individuals having started such placements in 2022-23. We have made £38 million available to eight projects across Scotland to provide additional residential rehabilitation beds. The latest published figures report a rise in capacity of 88 beds, giving a total of 513 in September 2024, and there has been further expansion since then.

I assure Mr Sarwar, first, of the importance of that endeavour and, secondly, of the practical steps that have been taken to implement the commitments that we have given, and that we will continue to implement.

Anas Sarwar: The promises have not been fulfilled, and the families who have been left behind deserve justice, not excuses. Shamefully, new figures show that, in the past three years, 573 charges of drug dealing had to be dropped because the cases were time barred before reaching court. Hundreds of people who were accused of drug dealing simply walked free. They evaded justice not because they were found innocent but because of the Government's incompetence. People selling poison to their communities are being given the green light to destroy lives because John Swinney and his tired Government cannot run a court system that sends drug dealers to prison. I reiterate that 573 drug-dealing charges have simply been dropped. Can John Swinney understand why people will be so angry when they learn that, despite one life being lost to drugs every seven hours in Scotland, hundreds of drug dealers are walking free?

The First Minister: The issues with the court service are an effect of the situation that developed during the Covid pandemic, when a backlog of cases had to be addressed. The court service worked—and is still working—incredibly

hard to erode the backlog that we have been wrestling with, and significant work has been undertaken.

I will look at other data. As the Cabinet Secretary for Justice and Home Affairs reported to Parliament last Thursday, our prisons are incredibly congested, in many cases with individuals who have been convicted and sentenced for long periods of time as a consequence of their drug-related activities. Our prison system and the Scottish Prison Service are wrestling admirably with the congestion that is caused by the many people involved in the organised crime that underpins the drug issues.

I know that the Crown and the Scottish Courts and Tribunals Service are working incredibly hard, and in an incredibly focused way, to ensure that those who perpetrate illegal drug activity in our society are brought to justice, and that many of them are.

Anas Sarwar: There is no justification—none—for hundreds of drug dealers walking free because of the incompetence of this Scottish National Party Government. There is no justification at all.

This Government has lost control: 607 lives have been lost in just six months, which is one every seven hours; 573 drug supply charges have gone unpunished; and there is still not enough access to treatment or residential rehab for those who want to recover. The truth is that John Swinney's approach is failing both victims and communities. Dealers slip through the cracks, people die while they wait for help, and families lose loved ones and are left without hope.

It has been six years since the Government declared an emergency, but Scotland still leads Europe on the figures for drug deaths. John Swinney has abandoned both justice and recovery. Is it not the case that we will never get to grips with Scotland's drug deaths emergency while he and the SNP stay in charge?

The First Minister: The Government has taken a focused approach, over a number of years, to addressing the issue of drugs in our society, and a number of significant steps have been taken.

I have put on the record the issues concerning the expansion of rehabilitation placements, and the fact that the progress that we committed to is being achieved.

We have supported the delivery of the first safer consumption room. Based on the evidence that is available to us, we know that the Thistle has saved lives as a consequence of that intervention. We have expanded the roll-out of naloxone, which is resulting in a significant reduction of death and injury to individuals who use drugs. I recognise that the level of drug deaths is far, far too high. In

the past year, we have seen a 13 per cent decrease in the number of such deaths in Scotland, but we must maintain absolute vigilance and focus to ensure that we continue to make progress.

Finally, on the issue of criminal justice, our prison system is absolutely full of individuals, many of whom have been imprisoned because of their drug-related activity, so it is quite simply wrong for Mr Sarwar to suggest that people are not being brought to justice for their criminal activity. *[Interruption.]*

The Presiding Officer: Mr Sarwar!

The First Minister: That will remain the focused priority of the Scottish Government.

Renewable Energy (Community Benefit)

3. Alex Cole-Hamilton (Edinburgh Western) (LD): I entirely associate myself with the First Minister's remarks about progress towards peace in the Middle East.

I also take a moment to offer the sincere thanks of the Scottish Liberal Democrats for the life and work of Sir Menzies Campbell, who was lost to us last week. Ming was a titan of British politics who commanded respect in the Parliament in which he served and in homes across this country. He was a mentor and friend to many in my party and we miss him. I offer condolences to his family at this difficult time. *[Applause.]*

When companies generate renewable energy, they are expected to give money back to the local community, but the amount of cash that we are talking about is pitiful, because the rules have not changed in more than a decade. All the while, people are still shivering in the shadow of turbines, unable to heat their homes. Will the Scottish Government listen to the Liberal Democrats, to Highland Council and to Shetland Islands Council and will it change those rules to cut energy bills for local people?

The First Minister (John Swinney): First, I thank Mr Cole-Hamilton for his words, as I thanked Mr Sarwar for his, on the situation in Gaza. I also associate myself with his remarks about Menzies Campbell, Lord Campbell of Pittenweem. I was warmly and fondly welcomed into the House of Commons by Ming Campbell in 1997 and I enjoyed far too many uproariously funny conversations with Ming and his late wife, Elspeth, who were always wonderful company. I convey to the Liberal Democrats, as I have conveyed privately, my appreciation and sympathy as they wrestle with the loss of a giant of the Liberal Democrat movement.

On the substantive question on renewable energy, I have a lot of sympathy with Mr Cole-

Hamilton's point. The issue of community benefits arising out of wind farm developments is regulated by the United Kingdom Government, and we have been pressing for some time to mandate community benefits from mature onshore renewables technologies and to create greater benefit for communities, particularly in relation to the reduction of fuel bills. I am sympathetic to his point, but it is an issue that the Government has pressed the UK Government on, and we will continue to do so.

Alex Cole-Hamilton: The First Minister cannot dodge this entirely. Some of it lies with his Government, too. Yesterday, I was in north Edinburgh with Ed Davey and Councillor Sanne Dijkstra-Downie and we met Edinburgh College apprentices who are being trained for good green jobs installing home insulation, solar panels and heat pumps. Those technologies are ready to go and they are at the heart of Liberal Democrats' realistic plan to halve household energy bills by 2035.

John Swinney's own independent advisers now say that his Government is extremely unlikely to meet its fuel poverty target. They found people catching hypothermia in their own homes, missing meals to top up the meter and burning their own floorboards as fuel. The Scottish Government's consultation on the amount that energy companies give back closed six months ago, but nothing has changed. Under Liberal Democrat proposals, there are millions of pounds out there that could warm homes across Scotland. When will the First Minister change those rules?

The First Minister: The existing arrangements, which are specified by the United Kingdom Government, are non-mandatory. As a consequence, there is a limit. It is one of the examples of the constitutional point that I make. I am very sympathetic to the member's point, but I cannot exercise powers that I am not legally entitled to exercise. That is one of the limitations of the constitutional arrangements.

I am absolutely with Mr Cole-Hamilton in wanting to use the energy wealth of Scotland, which is absolutely beyond dispute—we all agree about that—and I am absolutely with him on the desire to eradicate fuel poverty.

In the summer, I spent some time on the island of Yell in Shetland, where I saw an excellent example of a community wind farm that is creating real benefit in the locality and is owned by the community. Such models can be delivered where there is community ownership, and the Scottish Government enabled that development to be undertaken on Yell. I then went to the main island in Shetland and saw a colossal wind farm—the Viking Energy project—that is not delivering the right level of benefit to the community, nor is it

eradicating fuel poverty. People in Shetland are living cheek by jowl with one of the largest wind farms in Europe while paying the highest fuel bills and living in fuel poverty.

The powers to arrest that do not rest in this Parliament. They rest with the UK Government. I am determined—and I am very keen to work with Mr Cole-Hamilton—to get those powers here so that we can do something about it for the people of Shetland and the people of west Edinburgh.

Two-child Benefit Cap (Proposed Replacement)

4. Clare Adamson (Motherwell and Wishaw) (SNP): To ask the First Minister what assessment the Scottish Government has made of any implications for its work to mitigate the two-child benefit cap of the United Kingdom Government's reported proposals to replace the cap with a tapered system. (S6F-04378)

The First Minister (John Swinney): I have seen the press speculation to which Ms Adamson refers. It is important that the UK Government lets us know as soon as possible about any plans that it might have because, as Ms Adamson will know, the Scottish Government is pressing ahead with our measures to abolish the two-child limit, which should have been undertaken as one of the first acts of the Labour Government. The Scottish Fiscal Commission estimates that 43,000 children in Scotland will benefit from the Scottish Government's two-child limit payment, and Scottish Government modelling shows that 20,000 children will be kept out of relative poverty as a result.

Clare Adamson: In hearing the murmurings, I was not surprised to find out that Labour is now back-peddalling on its plans. With a record 4.5 million children living in poverty under the Labour Government, plans to introduce a tapered system are nowhere near good enough. Will the First Minister join me in calling for the UK Government to reconsider that short-sighted proposal and instead follow the Scottish Government's lead, dump the cap and dump the so-called rape clause?

The First Minister: I very much associate myself with the comments that Clare Adamson made. The Scottish Government is taking measures that are resulting in a reduction in child poverty in Scotland, but all the estimates show that, as a consequence of the actions of the Labour Government, particularly in welfare reform, there is likely to be a rise in child poverty across the rest of the UK, and, of course, across the rest of the UK, the level of child poverty is already rising.

I make the plea today—and I have made it on many other occasions—for the Labour Government to recognise the absolute imperative of eradicating child poverty, take the measures to lift the two-child cap and enable the Scottish Government to use the resources that we are using on that to mitigate another Westminster decision that is bad for Scotland.

Mental Health Budget

5. Brian Whittle (South Scotland) (Con): To ask the First Minister what the Scottish Government's response is to reports that the mental health budget has been reduced in the 2025-26 autumn budget revision. (S6F-04374)

The First Minister (John Swinney): The budget remains as originally published at £270.5 million.

Brian Whittle: I thank the First Minister for that answer, but the situation speaks to a wider problem across health and social care, namely that it is verging on impossible to follow the path from a Scottish Government spending commitment to the front-line support that it is intended to provide. Audit Scotland and the Fraser of Allander Institute have repeatedly warned that the complex and convoluted methods that are used by the Scottish Government are barriers to effective public scrutiny, and now organisations that are directly impacted by that funding are seemingly unable to determine how or even if the money that was promised will reach them.

As Scotland's Mental Health Partnership has said, transparency is essential. The First Minister might be able to explain where those tens of millions of pounds of public money are when he has a briefing note in front of him, but how does he expect the public, the organisations that rely on it and those who scrutinise the Government to do the same?

The First Minister: I think that transparency and clarity were in my original answer; the budget remains as originally published at £270.5 million. I understand the importance of the issue and the significance that Mr Whittle attaches to all of that, but I simply make the observation that it is interesting that Mr Whittle is interested in the budget of £270.5 million for mental health support, but he was not interested enough to vote for the budget when it came to Parliament. It is all very well to come here and complain about budgets, but people have got to vote for them for them to be spent in the community in the first place.

Paul Sweeney (Glasgow) (Lab): Dr Pavan Srireddy, the vice-chairman of the Royal College of Psychiatrists, has described the autism and ADHD waiting time scandal as "a public health emergency". Will the Scottish Government fulfil its

commitment to spend 10 per cent of the national health service budget on mental health by the end of this parliamentary session, so that those who are trapped on waiting lists will have some reassurance that they will get the support that they need?

The First Minister: The Government is on track to fulfil that commitment.

Economy (International Investment)

6. Michael Matheson (Falkirk West) (SNP): To ask the First Minister, following Scotland's global investment summit 2025, whether he will provide an update on the Scottish Government's work to attract international investment into Scotland's economy. (S6F-04377)

The First Minister (John Swinney): Scotland is a nation that is extremely attractive to investors due to our skilled workforce, world-leading universities, a strong presence in the skilled workforce in sectors such as energy and a supportive business environment. That is why we have been ranked as the top destination for foreign direct investment outside of London and the south-east for the past 10 consecutive years. That work is led by the Deputy First Minister, who was actively engaged—as I have been—in the global investment summit that took place in Edinburgh this week.

Michael Matheson: Scotland's record in attracting direct foreign investment has been consistently good. Last year alone, Scotland attracted 135 projects and it is ranked the sixth most attractive location in the top 10 locations in Europe for foreign direct investment.

However, the First Minister will recognise that making sure that we attract energy manufacturing capacity to Scotland to support us in the building out of our renewables is critical to delivering a just transition. What specific action is being taken to ensure that we attract that type of investment to create the jobs that we are looking for in the Scottish economy?

The First Minister: A number of steps have been taken, particularly in relation to strengthening the scoping and consenting arrangements for offshore renewables projects. The Government is focused on taking those decisions. We work closely with the United Kingdom Government and press the argument, particularly with GB Energy and those responsible for the national grid, that there should be connectivity for those projects, so that the supply chain can have confidence in its investment decisions.

A number of developments that have taken their course—at Ardersier, and Sumitomo at Nigg—are strong indications of good foundations for the supply chain. However, we need every step of the

journey to be undertaken to give us confidence in attracting investment. The Scottish Government is focused on making sure that that is the case.

Craig Hoy (South Scotland) (Con): In a week when John Swinney released yet another taxpayer-funded fantasy pamphlet on independence, the City of London Corporation stood shoulder to shoulder with Scotland to unlock new opportunities for growth. However, two areas where the SNP Government has effectively scuppered future inward investment are nuclear energy and oil and gas exploration, both of which are vital to our energy security and economic security. Now that John Swinney has been freed from the shackles of the extremist Greens, why does he not do the right thing by the Scottish economy and commit fully to drilling the North Sea and ending his Government's student union politics on nuclear energy in Scotland?

The First Minister: We all make our policy choices. On nuclear, I have made the policy choice to ensure that we develop Scotland's natural and sustainable sources of energy, because that is better for our people and our planet. I am proud to defend that in Parliament today.

Secondly, it is the shiniest of brass necks imaginable for Craig Hoy to indicate that there is an issue with oil and gas activity, because the Conservative Government that he supported presided over the punitive tax regime of the energy profits levy, which is recognised by every commentator to be the biggest impediment to the security of the North Sea oil and gas sector. Mr Hoy should face up to the realities of the dreadful decisions made by the last Conservative Government.

The Presiding Officer: We move to constituency and general supplementary questions.

National Health Service (Migrant Nursing Staff)

Emma Harper (South Scotland) (SNP): The general secretary of the Royal College of Nursing has said:

"Health and care services would cease to function without migrant nursing staff."

Does the First Minister agree with that statement, and will he outline what assessment his Government has made of the impact of the Labour Government's new immigration rules on vital essential workers in Scotland's national health service?

The First Minister (John Swinney): The general secretary of the Royal College of Nursing has given a siren warning to all of us about the welcome that has to be extended to staff from

other countries to come and work in our national health service.

In the year ending June 2025, the number of health and care worker visas issued to nursing professionals fell by 80 per cent. That will have a damaging effect on the operation of our national health service. We all know that there are challenges in relation to the size of our working-age population and a need for an appropriate skilled worker visa route that works in the interests of the national health service. That is one of the reasons why, if we have control of those issues in Scotland, it will be better for the people of Scotland.

National Health Service (Electric Shock Treatment)

Alexander Stewart (Mid Scotland and Fife) (Con): A recent report has uncovered that NHS patients in my region and across Scotland were forced to receive electric shock treatment against their will almost 1,100 times last year. In around 2,000 cases out of 4,000, that outdated procedure was performed on people who, because of their mental state, were deemed incapable of giving consent. How will the Scottish Government act to ensure that vulnerable patients are protected from receiving that ethically unacceptable procedure?

The First Minister (John Swinney): If Mr Stewart writes to me, I will explore that in more detail. The issue merits a deeper answer than I can offer him at this stage. My first reaction would be that such judgments have to be made on the basis of clinical opinion, but Mr Stewart raises a wider and more significant issue, which I would rather have the opportunity to explore. If he would care to write to me, I will give him a substantive response.

The Promise

Martin Whitfield (South Scotland) (Lab): The report "Improving care experience: Delivering The Promise", by the Accounts Commission and the Auditor General, which was published yesterday, concluded that, from the outset, there was no assessment of what resources and skills were needed to deliver the Promise by 2030, or of how success would be defined or measured. Who should take responsibility for that failure?

The First Minister (John Swinney): As Mr Whitfield knows, I take responsibility for everything here. I am the First Minister of Scotland—I do not dodge that for a moment. We gave a commitment as a Government to honour the Promise. As for the definition of success, I am a wee bit mystified by that point in the Audit Scotland report. It is pretty clear what the Promise has to achieve by 2030, and we are making progress in that respect.

I understand Mr Whitfield's interest in the question, but substantive progress has been made. For example, we have taken action to ensure that no young people under 18 are admitted to young offenders institutes, and we have fewer children in Scotland growing up in care since 2020—a reduction of 18.1 per cent. Incidents of physical restraint and seclusion are declining in children's residential accommodation, and more people with care experience are going on to positive destinations nine months after leaving school.

I acknowledge that there is more work to be done. The work has been taken forward very effectively by the minister responsible, Natalie Don-Innes, who has my full support. We have legislation on the issue, which Parliament can scrutinise, and that will be dealt with by Parliament before the close of the parliamentary session.

Employer National Insurance Contributions

Michelle Thomson (Falkirk East) (SNP): The latest Scottish Chambers of Commerce quarterly economic indicator survey, which was published this morning, shows that seven out of 10 Scottish firms continue to struggle with higher employment costs and have concerns about further potential adverse policies from the United Kingdom Labour Government. Has the Scottish Government had the chance to assess the impact of the increase in employer national insurance contributions on employers in Scotland—a tax on Scottish businesses—and if so, what are its findings?

The First Minister (John Swinney): That is a serious issue, because the increase in employer national insurance contributions has reduced competitiveness and opportunities for growth in the Scottish economy. The Government's analysis shows that the changes could cost employers in Scotland more than £1.7 billion, and the cost to public services is of the order of more than £500 million. That indicates that a significant burden is being carried by business in Scotland, which, as a consequence, is an inhibitor of growth. It is beyond me why a Government that apparently supports economic growth is taking such a measure. It is another example of why we should take decisions here in Scotland on our behalf that are in the interests of the Scottish people and the Scottish economy.

NHS Grampian

Tess White (North East Scotland) (Con): NHS Grampian has plunged into further financial crisis, with the board's financial director saying that it is struggling to "keep afloat". This morning, a diagnostic report from KPMG said that expenditure has risen by £153 million—a 33 per cent increase. NHS Grampian already has the lowest bed base in

Scotland. The Cabinet Secretary for Health and Social Care has failed to get a grip. The strain is intolerable for staff and patients. Will the First Minister please meet the board, which this morning put out a Facebook post saying that it has a "path to improvement"? I do not think that it does. Will he meet the board urgently to discuss its financial crisis in advance of winter?

The First Minister (John Swinney): The Government has taken measures in relation to NHS Grampian, and the board is under a significant level of additional scrutiny as a consequence of the issues that Tess White puts to me. I know that the cabinet secretary is meeting the board on Monday. I will wait to get a read-out of the report that Tess White mentioned. I am very happy to engage. I discuss the performance of the national health service with my officials on a weekly basis, and I will reflect on the points that she puts to me.

I assure Tess White that the issues that are important for the delivery of healthcare to the communities in the north-east of Scotland are being properly and effectively scrutinised and delivered, and I will ask the cabinet secretary to write to her with an update on those issues.

Caledonian Maritime Assets Ltd (Board Membership)

Rhoda Grant (Highlands and Islands) (Lab): The First Minister will be aware that the only islander on the board of Caledonian Maritime Assets Ltd has not had his membership renewed. That is a snub to our island communities, which are left yet again with no islander on the board. What will the First Minister do to increase the number of islanders on the board and ensure that islanders are represented on boards that are crucial to island communities' survival?

The First Minister (John Swinney): As Rhoda Grant will appreciate, the process of appointing members to boards is overseen by ethical standards advisers and it must take its course. However, she makes a substantial point about the necessity for island opinion and experience to inform the decisions of bodies that are acting on issues that significantly impact island communities. Regardless of board appointments, I would expect CMAL, Caledonian MacBrayne, Highlands and Islands Enterprise, the Crown Estate, NatureScot and all the other bodies that have a locus in relation to the issues and experience of islanders to go to absolute lengths to ensure that they can hear islanders' opinions, listen to them and address the issues that they raise. Those issues are legitimate and boards must take them seriously. Although board membership cannot reflect Rhoda Grant's legitimate aspiration in all circumstances, boards

must listen to islanders and act on their behalf. I will ensure that that is the case.

Right to Protest (Hate Crime and Public Order (Scotland) Act 2021)

John Mason (Glasgow Shettleston) (Ind): We all support the right to protest, assemble, march, and so on, yet the Hate Crime and Public Order (Scotland) Act 2021 makes it an offence to stir up hatred. Does the First Minister think that we have, or can achieve, the right balance? Some groups, such as Catholic and Irish people, feel threatened by the repeated Orange marches in Glasgow, and Jewish people feel threatened by the repeated pro-Palestinian protests.

The First Minister (John Swinney): That is a sensitive issue and I have to be careful, because we are in territory in which Police Scotland has to make careful judgments about a variety of long-standing circumstances in Scottish society. Some of the issues are easier to handle than others.

Fundamentally, I believe that we have to recognise the right to peaceful, respectful public assembly and freedom of expression. We all enjoy that right and are committed to upholding it. However, the right to peaceful assembly and freedom of expression should never be used to carry out or justify any form of hateful, violent, intimidating or otherwise criminal behaviour. Any form of hate crime is completely and utterly unacceptable. The 2021 act includes rigorous safeguards on free speech, which we respect everybody's right to.

Boycott, Divestment and Sanctions Policies (Israel)

Lorna Slater (Lothian) (Green): Just two weeks ago, our capital city and my home town, Edinburgh, backed Scottish Green councillors' calls to ensure that no public money is being used to bankroll Israel's genocide. That comes more than a month after our Parliament voted to back our calls for boycott, divestment and sanctions against the genocidal Israeli regime.

What additional legislative changes will the Scottish Government pursue to enable local authorities such as the City of Edinburgh Council to legally adopt the BDS policies that the Parliament has agreed to support?

The First Minister (John Swinney): In my statement on 3 September, I set out to the Parliament the actions that are within the Parliament's competence and responsibility to take forward. The Government will pursue that agenda to ensure that we fulfil the commitments that I gave to the Parliament.

Independence (Living Standards and Energy Bills)

Keith Brown (Clackmannanshire and Dunblane) (SNP): As we have heard, this week, the Scottish Government published "A Fresh Start with Independence". At a time when many of my constituents are struggling to heat their homes and pay for their food shopping due to Westminster inaction—and bearing in mind that the promise to reduce energy bills by £300 has turned into an increase of £200—will the First Minister outline his Government's findings on the impact that independence would have on living standards and energy bills?

The First Minister (John Swinney): The Government's paper that was published yesterday makes clear that there are opportunities to improve the living standards of people in Scotland by exercising the powers that would come with independence. In 2014, we were promised lower bills, financial security and European Union membership, but all those promises have turned to dust. This is the time for Scotland to have a fresh start with independence.

Integration Joint Boards

Meghan Gallacher (Central Scotland) (Con): Families of residents at a sheltered housing complex in Falkirk are deeply concerned about plans to outsource care services to an external provider. The proposals, which would remove the round-the-clock care service at Tygetshaugh Court, form part of an effort to address the £21 million budget shortfall. Families were not properly consulted, and local councillors have expressed frustration about their lack of influence over decisions that are made by the integration joint board. Should decisions that directly impact local communities be made by councillors or by an IJB in which the majority are unelected?

The First Minister (John Swinney): The arrangements for IJBs were put in place by statute that was considered by Parliament. It is the responsibility of the IJBs to take those decisions, and there will be members of any relevant local authorities on those boards. However, there should also be appropriate and adequate consultation with people who are affected by service changes. That is an implicit part of all the approaches that are taken to any service changes that take place, and I encourage that to be the case in this circumstance.

The Presiding Officer: That concludes First Minister's question time.

The next item of business is a members' business debate in the name of Clare Adamson, and there will now be a short suspension to allow

those leaving the chamber and the public gallery to do so.

12:45

Meeting suspended.

12:47

On resuming—

Breast Cancer Now Awareness Day 2025 and Wear It Pink Initiative

The Deputy Presiding Officer (Annabelle Ewing): The next item of business is a members' business debate on motion S6M-18752, in the name of Clare Adamson, on Breast Cancer Now awareness day 2025 and wear it pink. The debate will be concluded without any question being put. I invite members who wish to speak in the debate to please press their request-to-speak buttons.

Motion debated,

That the Parliament recognises Breast Cancer Now Awareness Day 2025, which takes place on 24 October, and commends what it sees as the vital work of Breast Cancer Now, which, it understands, is the UK's leading breast cancer research and support charity; acknowledges what it considers the importance of the annual Wear It Pink initiative, which raises millions of pounds for lifesaving breast cancer research and care, and notes the calls for individuals, workplaces, schools and communities across Scotland to take part and show their support by wearing pink and fundraising on the day; pays special tribute to the late Christina McKelvie MSP, a dear friend and colleague, whose unwavering support for breast cancer awareness, equality and compassion continues to inspire; understands that around 4,700 people in Scotland are diagnosed with breast cancer each year, and that early detection, timely treatment and ongoing support are crucial to improving outcomes; notes the view that there is a need for continued investment in research, improved access to care and increasing awareness of secondary breast cancer, for which, it understands, there is currently no cure, and further notes the view that, by working together, raising awareness and supporting vital initiatives like Wear It Pink, people can make a real difference in the lives of those affected by breast cancer, now and in the future.

15:47

Clare Adamson (Motherwell and Wishaw) (SNP): I am delighted to speak in support of the motion recognising Breast Cancer Now awareness day 2025, which takes place on 24 October, and I thank all those members of the Parliament who supported the motion and allowed it to come to the chamber today. I am also delighted to welcome Kira McDiarmid and Jen Hardy from Breast Cancer Now, who are with us in the gallery today. It is wonderful to have them here to mark this important occasion and to enable us to recognise the vital work that they and their colleagues do every day, including in this Parliament. *[Applause.]*

This day is not just a date in the calendar; it is a day of solidarity, hope and determination in the face of one of the most common and devastating diseases that affect people across Scotland, the United Kingdom and the world.

We commend the vital and tireless work of Breast Cancer Now, the UK's leading breast cancer research and support charity. Its vision is bold but essential. It is that, by 2050, everyone who is diagnosed with breast cancer will live and be supported to live well. That is not just a mission statement; it is a call to action for all of us—policy makers, researchers, healthcare workers and communities alike. That work matters because breast cancer affects one in seven women in the UK during their lifetime. My sister started her journey in January this year. The issue also matters to men, who often have less awareness of the condition and receive less support after diagnosis, and it matters to the families and friends who work alongside people through diagnosis, treatment, recovery and loss.

One of the most important and powerful initiatives on breast cancer is the wear it pink campaign. Since 2002, it has raised more than £39 million for breast cancer research and care. Each October, people across Scotland and the UK, in schools, workplaces and homes, wear it pink to fundraise and show their support. Many of my colleagues did that last week—I ask that they bring the feather boas back.

In Scotland alone, the wear it pink campaign has raised more than £2.5 million in the past five years. That is an extraordinary contribution, and it shows what can be achieved when people come together with hope and determination. Wear it pink is a simple act, but it sends the powerful message that we are united in this fight. I encourage everyone in the chamber and beyond to get involved. Whether people hold a bake sale or a dress-up day or simply make a donation, every action counts. It is one day, one colour and one powerful message.

Breast cancer affects people in Scotland and across the UK, and it is also a reality that millions more face around the world. Around 4,700 people in Scotland are diagnosed with breast cancer every year, which is more than 12 people every day. Around 25 of those diagnosed each year are men. Globally, breast cancer is the most common cancer, with more than 2.3 million people diagnosed each year, and it leads to more than 685,000 reported deaths worldwide according to the World Health Organization.

Those figures represent far more than numbers; they reflect the lives of families, friends, colleagues and communities who are impacted by breast cancer every single day. They remind us why our gathering to wear it pink in the Parliament is so important. We came together in the garden lobby and the Burns room of the Parliament last week to wear it pink and show solidarity with Breast Cancer Now. It was wonderful to speak to survivors about their journey. The sense of unity

among members, advocates, patients and families standing side by side demonstrates the strength of the campaign and the determination behind it.

We have made progress. Thanks to investment in research and early detection, the five-year survival rate is now over 85 per cent.

We can be proud of that, but it is not the full picture. For those living with secondary breast cancer, where the cancer has spread and is no longer curable, the outlook is still deeply concerning. It is estimated that more than 1,000 people in Scotland die of breast cancer each year—many of them from secondary cancer. Those patients often do not have the benefit of the same level of visibility, data collection or specialised care as those with primary breast cancer, and that is something that we can change. We must shine a stronger light on secondary breast cancer. That means better data collection, quicker and more accurate diagnosis, increased opportunities for clinical trials and wider access to specialist support. Although a cure may not yet be within reach, people living with incurable cancer deserve time, dignity and the best possible quality of life.

This year's awareness day also gives us a moment to remember someone whom many of us knew, loved and respected—Christina McKelvie MSP. Christina was more than a colleague; she was a friend to all and a passionate advocate for equality, dignity and justice. She was someone who consistently fought for those who needed a voice and for those who found themselves marginalised, disadvantaged and often overlooked. Her voice in this chamber was powerful, and her absence is deeply felt. We honour her legacy by continuing the work that she believed in so strongly.

Breast cancer affects every part of our society, across every postcode and background. It impacts women and men and families. It does not discriminate, and neither should our efforts to fight it. Let us use Breast Cancer Now awareness day not only to raise funds and wear it pink, but to push forward with purpose. Let us continue to invest in research, ensure equal access to care and raise awareness for those who are still fighting and those who are living with secondary cancer. *[Applause.]*

The Deputy Presiding Officer: Thank you, Ms Adamson. We move to the open debate.

12:54

Marie McNair (Clydebank and Milngavie) (SNP): I congratulate Clare Adamson MSP on securing this important debate and on all the work that she has done in Parliament to raise

awareness of breast cancer and the wear it pink campaign.

I am pleased to speak in the debate and pay tribute to my dear friend and beloved colleague Christina McKelvie. Christina's warmth, kindness and passion for equality drive us all. In her memory, we must push harder to raise awareness and call for more research, to ensure that no one loses their life to breast cancer.

A few months ago, I went for my first breast screening. I am not afraid to admit that I was a bit nervous and apprehensive about it. However, I did not need to be, as the wonderful Gillian at the Golden Jubilee hospital in my home town of Clydebank put me at ease from the word go and carried out the mammogram with minimal discomfort.

The procedure took less than 10 minutes, so I urge anyone who is called for the screening to go, as it can save your life. It is essential, as one woman in nine in Scotland will develop breast cancer. Screening can find breast cancer before you notice any symptoms, and you are more likely to survive if it is found early. Even if you are fit and healthy, it is important that you attend and check yourself regularly.

Breast cancer is the most common cancer in women in the UK. A woman is diagnosed every nine minutes and a man every day. Thanks to advances in research and treatment, almost nine women in 10 survive breast cancer for five years or more. Breast cancer survival rates have doubled in the past 50 years, and it is estimated that routine screening prevents around 1,300 deaths from breast cancer each year in the UK. According to Breast Cancer Now, in the 1990s, more than one person in seven died from breast cancer, whereas today it is one in 20. That is a positive improvement, but more needs to be done. That is why the Breast Cancer Now wear it pink initiative is important. It raises millions of pounds for life-saving breast cancer research and care.

More needs to be done to increase awareness of secondary breast cancer, for which there is currently no cure. Currently, around 1,000 women in the UK die each month as a result of secondary breast cancer. I agree with Breast Cancer Now that it is a matter of urgency that we should dramatically improve outcomes for people whose cancer has spread.

Unfortunately, there are also inequalities in relation to cancer. There are inequalities in the risk factors for breast cancer, the uptake of breast cancer screening and survival rates. Lifestyle factors increase the risk of breast cancer. Public Health Scotland is clear that each of those factors is socially patterned, with people who live in deprived areas being more at risk. Women on low

incomes are less likely to go for breast cancer screening, and breast cancer survival rates are worse in women from more deprived areas, partly due to the lower uptake of breast cancer screening. Public Health Scotland advises that, for the three-year period from 2020 to 2023, women from more deprived areas were less likely to attend breast screening: 64.2 per cent from the most deprived areas compared to 82.8 per cent in the least deprived areas. I want more action on that, to ensure that everyone can receive a timely diagnosis and treatment to beat breast cancer.

My sincere thanks go to Breast Cancer Now for all its amazing work and to its local co-ordinator, Kirsteen McDonald, for taking the time to meet me. In Christina McKelvie's memory, let us continue to work together to ensure that breast cancer no longer takes the lives of those we love.

12:58

Stephen Kerr (Central Scotland) (Con): I associate myself with everything that Clare Adamson says in her motion and said in her excellent speech. I recognise Breast Cancer Now awareness day 2025 and commend the vital work of Breast Cancer Now, which is the UK's leading breast cancer research and support charity.

I recognise, as Clare Adamson said, that the wear it pink campaign is an effective way of raising awareness. I am a week late—I see that the Cabinet Secretary for Health and Social Care is also wearing pink—but I recognise the importance of the campaign, of showing solidarity and of communities demonstrating that they stand with people who are affected by breast cancer. It is a simple act, but it carries a powerful message of compassion and hope.

I thank God for the professionalism and compassion of the people who treated my wife, Yvonne, when she was diagnosed with breast cancer. No one forgets the moment when the words, "You have cancer" are spoken. The room falls silent, the world narrows and your heart sinks with fear for the one you love. In that moment, everything depends on the people around you. For Yvonne and me, it was the breast screening services team in Glasgow—it was they who first told Yvonne. I will never forget the quiet calm with which they broke the news. There was no panic, no bluntness and no false reassurance—just steady, compassionate professionalism. They explained what the diagnosis meant and what the pathway ahead would look like, treating Yvonne not as a statistic but as a woman with fears, hopes and a family who loved her.

The consultant surgeon who cared for Yvonne was equally remarkable. With clarity and sensitivity, she guided us through what surgery

would involve. Her calm authority, patience and absolute dedication gave us reassurance at a time of great fear and uncertainty.

After surgery, Yvonne's treatment moved to the Beatson West of Scotland Cancer Centre in Glasgow. I pay the highest tribute to the staff there. They were at the cutting edge of cancer treatment. However, what struck me most was their humanity. They did not simply deliver treatment—they cared. They knew Yvonne's name, they asked after her wellbeing, and they invested themselves in her recovery as though she were one of their own. I saw that same care extended to every patient who walked through those doors. I cannot speak highly enough of them. To this day, my gratitude is without limit, because they gave me my wife, and they gave us both the chance of time together—something never again to be taken for granted.

That experience taught me that breast cancer is not borne by the patient alone; it is shared by husbands, wives, children, families and friends. I want to pay special tribute to Jo Churchill, the former member of Parliament for Bury St Edmunds and a two-time cancer survivor. During Yvonne's treatment, Jo's empathy and wisdom were a lifeline to me. Her support reminded me that compassion and solidarity matter almost as much as treatment.

The statistics remain sobering. Around 5,500 people are diagnosed with breast cancer in Scotland each year, and 1,000 die. Too many still wait too long for a diagnosis. Too many lack access to genomic testing. Secondary breast cancer—for which there is no cure, as was mentioned earlier—still blights lives.

We must be ambitious. That means resourcing our screening programme in order to achieve the 80 per cent target, collecting proper data on secondary breast cancer and ensuring access to new treatments and genomic testing on the national health service, not just private access.

In support of the motion and of Clare Adamson's speech, I say let us wear pink with pride. Let us raise funds. Let us commit to ensuring that Scotland leads in research, treatment and care. In doing so, we give hope to those who live with breast cancer today and to those who will face it tomorrow. *[Applause.]*

13:03

Jackie Baillie (Dumbarton) (Lab): I congratulate Clare Adamson on securing this important debate and commend her for her thoughtful contribution. Like other colleagues, I associate myself with her remarks.

Like many other members, I come to the debate thinking of Christina McKelvie. I first met Christina when she was a young learning and development officer in social work services, working to improve the lives of families in Glasgow. It was absolutely characteristic of Christina that, even before she was diagnosed with breast cancer in 2020, she already supported Breast Cancer Now's wear it pink campaign. She responded to her diagnosis by campaigning even harder to encourage women to regularly check their breasts and attend screening appointments.

Sadly, however, breast cancer remains one of the main causes of death in Scotland, and the vast majority of those who are affected are women. As Marie McNair rightly said, one in nine women in Scotland will develop breast cancer, but they are five times more likely to survive it if it is caught early.

Yesterday, I had the privilege of chairing a meeting with Atos Scotland and Breast Cancer Now to discuss what more progress can be made in screening. Uptake in Scotland right now is just over 75 per cent, which is good, but that still means that one in four eligible women are missing that vital opportunity. Although around 80 per cent of women from the least deprived fifth of the population take up screening, the rate among the most deprived fifth is 65 per cent. Last week, I urged the Scottish Government to publish the cancer deprivation figures, and I repeat that call now, because it is only with accurate data that we can target those who need it most effectively.

Raising awareness of screening is only part of the picture. For screening to work, not only do we need women to come in the door; we need radiographers to take scans and radiologists to make diagnoses based on the results. It is the whole journey that matters. I heard earlier this year from the Society of Radiographers, which warned that many of its members are at the point of burnout. Demand for diagnostic radiography has increased by 11 per cent year on year, and there is no equivalent increase in radiographer numbers or their equipment. Meanwhile, the latest census from the Royal College of Radiologists found that there was a 25 per cent shortfall of radiologists in Scotland, which is expected to rise to 35 per cent by 2029. In addition, of all the UK nations, Scotland has the worst shortage of clinical oncologists who treat cancer. Further, Scottish Labour research that was published earlier this year found that Scottish hospitals are relying on scanners that, in many cases, are decades old. We can do so much better.

There is a new drug to treat secondary breast cancer, which the Scottish Medicines Consortium considered recently—this week, I believe—and an announcement is expected next week. However,

we lack the capacity for the type of genetic testing that is required along with the drug, which is routinely available to women in NHS England. I plead with the Minister for Public Health and Women's Health and the Cabinet Secretary for Health and Social Care to act quickly to ensure that the drug can be used in Scotland, if passed by the SMC.

For 2025-26, the UK Labour Government delivered a record budget settlement for Scotland, including around £2 billion extra for Scotland's NHS. It is up to the Scottish Government to ensure that that money is invested appropriately. I ask the Scottish Government to commit to investing in scanners and developing a proper workforce plan so that women who turn up for screening know that, if anything is found, they will have the fastest possible route to treatment.

13:07

The Minister for Public Health and Women's Health (Jenni Minto): I, too, express my sincere thanks to Clare Adamson for bringing this important motion to the chamber for debate and to my fellow MSPs, who have all provided meaningful and thought-provoking contributions to our discussion.

I associate myself with the motion's commendation of the work of the charity Breast Cancer Now. It is an active member of the Scottish Cancer Coalition, and I greatly appreciate its contribution to the national conversation on issues in relation to breast cancer and its vital work in supporting women living with breast cancer in Scotland. Clare Adamson and other members are right to recognise the support that men living with breast cancer get, too.

I have met the charity on a number of occasions since I became Minister for Public Health and Women's Health, and I look forward to continuing that important collaboration into the future. The charity published its five-year strategy at the end of September, and I was pleased to note that our priorities continue to be aligned in the coming years and that its three key themes—earlier diagnosis, care and support, and new treatment—echo the ambitions of our 10-year cancer strategy for Scotland, which we published in 2023.

Everyone in the chamber has been completely correct about wear it pink. Stephen Kerr talked about what an effective way it is of raising awareness but also about the messages of care and hope that it brings.

The motion has awarded us the opportunity to mark the important contribution of Christina McKelvie.

Keith Brown (Clackmannanshire and Dunblane) (SNP): I apologise if I am pre-empting the minister's next remark. I commend the Scottish Government for approving the drug Enhertu, which is not approved elsewhere in the UK. There are campaigns to make it available elsewhere.

The minister mentioned the wear it pink campaign, and Stephen Kerr did as well. I let the select band of members in the chamber know that next year, on 4 April, there will be a wear it pink event for Christina McKelvie, which will continue from the 10 to 15 years for which Christina hosted the wear it pink campaign in the Parliament. It will not be a Scottish National Party event; it will be open to everyone, if you can get a ticket. The money raised from that will go, in part, to Breast Cancer Now. I bring that to the attention of the minister and members.

Jenni Minto: I thank Keith Brown for that intervention and I hope that I will be able to get a ticket to that event.

As I was saying, the motion has given us the opportunity to mark the important contribution of our dear friend and colleague Christina McKelvie to amplifying the voices of women with breast cancer in Scotland.

Earlier this year, we had a very powerful motion of condolence for Christina. For me, Christina represented the heart and soul of our party. Her determination to make Scotland a better place to live in for the generations to come and her passion to see Scotland thrive as an independent nation meant that she dedicated her life to encouraging others to speak up and speak out for what is right. She championed so many important causes and was the epitome of what progressive politics should look like.

The first time that I saw Christina McKelvie speak, I remember thinking, "Who is this amazing woman?" She was full of energy. She spoke with such passion. She owned the room and, simply, she held everyone in the palm of her hand. Her demeanour was infectious and her presence will be forever missed in this chamber.

Christina's focus on supporting minorities and women should be applauded and her particular focus on women's health meant that she was a passionate advocate for all the issues in relation to breast cancer. As others have said, she had been so before her personal diagnosis. She was committed to ensuring that women regularly checked their breasts and were aware of signs and symptoms of breast cancer, as well as to encouraging all eligible women to attend their appointments at her national breast screening programme. I thank Marie McNair for emphasising the importance of that in her contribution.

I am pleased to be here to outline some of the actions that the Scottish Government is working on to continue Christina's important legacy on this issue.

Clare Adamson: I appreciate that the minister is about to move on to say what is happening. I want to remember on record that one of the first things that Christina did after her diagnosis was to have the age protocols for screening changed. I was a couple of months older than Christina—she never let me forget it—but, because of the cycle of when people were called to be tested, I had my first breast cancer screening test three years before she did. She changed that system to ensure that every woman would have that screening in her 50th year.

Jenni Minto: Clare Adamson raises an incredibly important point about Christina McKelvie's focus on doing the right thing. I thank her for mentioning it.

We know that one in nine women living in Scotland will develop breast cancer at some stage in their life. Breast cancer is the second most common cancer in Scotland and the most common cancer to be detected in females. Importantly, due to improved detection and treatment options, survival rates have significantly increased over the past 30 years. Women are five times more likely to survive breast cancer if it is caught early. However, that does not mean that we should stop looking at new ways to work on it, such as the one that Clare Adamson just highlighted.

We know that earlier diagnosis is vital. That is why we continue to invest in our detect cancer earlier programme, which encompasses primary care, diagnostics, public education, data, innovation and screening. The programme works closely with the Scottish Cancer Coalition, including Breast Cancer Now, to support awareness-raising efforts, and uses social media channels to promote joint content and messaging where possible. Our "Be the Early Bird" campaign, which was launched in March 2023, aims to reduce the fear of cancer and to empower those with possible symptoms to act early. The campaign has been rerun several times over the past three years, specifically to target women aged 40-plus from areas of deprivation.

We are also committed to ensuring that those women who are diagnosed with breast cancer receive the best possible treatment and support. Our strategy has a range of measures that aim to benefit all those who are living with cancer, including implementation of a single point of contact to support patients throughout their journey and after discharge. It was heartening to hear about Stephen Kerr's wife's experience at the Beatson and throughout her treatment.

In Scotland, we are proud of our national breast cancer screening programme. All women aged 50 to 70 are invited for breast screening every three years, and women over 71 can request an appointment if it has been more than three years since their last appointment. My officials are also working with Screening Oversight and Assurance Scotland to implement the recommendations from its breast screening modernisation report, which was submitted earlier this year. The final report will be published in the coming weeks.

Christina McKelvie also championed the importance of improving data collection for metastatic breast cancer in Scotland. She shone that light, as Clare Adamson mentioned. I appreciate that that is an important issue for Breast Cancer Now and for patients including Jen and Alison, who I was so pleased to meet last Thursday on wear it pink day.

In our cancer action plan, we committed to improving data collection for metastatic cancers, and we are starting that process with breast cancer. My officials, along with colleagues in Public Health Scotland, are currently undertaking a thorough review of our options in relation to collecting data on secondary breast cancer in Scotland. As part of that work, they are considering the clinical time required and how such data can be used to improve services. My officials expect to receive advice from Public Health Scotland imminently. Following receipt of that advice, our aim is to agree the best method of data collection by 2026, which is the completion date for our cancer action plan. I note the points that Jackie Baillie made about the SMC's deliberations, and I will take that issue away.

I reiterate my thanks to Clare Adamson and all my colleagues for their contributions today. I also thank Breast Cancer Now and all the other organisations that provide vital support to women and men living with breast cancer in Scotland. Together, we must build on the legacy of Christina McKelvie and the many other women who have lived with breast cancer.

The Deputy Presiding Officer: That concludes the debate.

13:17

Meeting suspended.

14:00

On resuming—

Portfolio Question Time

Education and Skills

The Deputy Presiding Officer (Liam McArthur): Good afternoon. The next item of business is portfolio question time, and the portfolio on this occasion is education and skills. There is quite a bit of interest in asking supplementary questions, so I make the usual appeal for brevity in questions and responses.

Single-sex Spaces (Schools)

1. Tess White (North East Scotland) (Con): To ask the Scottish Government, in light of the publication of its revised guidance on supporting transgender pupils in schools, whether it can guarantee that, effective immediately, single-sex spaces, including toilets and changing rooms, have been made available to all girls during school hours. (S6O-05050)

The Cabinet Secretary for Education and Skills (Jenny Gilruth): Under the Education (Scotland) Act 1980, education authorities have the statutory responsibility for the delivery of education. The Scottish Government therefore does not carry the legal responsibility for the management of schools, or of their facilities, including the provision of toilets and changing rooms, which is a matter for education authorities.

The Scottish Government's role is to provide education authorities and schools with non-statutory guidance to inform their work in relation to the legal requirements and associated national policies. The guidance that was published last week fulfils that role. For the avoidance of doubt, that updated guidance reflects the Supreme Court judgment and states that

"separate toilet facilities for boys and girls must be provided in schools"

and that

"the facilities require to be made available on the basis of biological sex".

Tess White: Parents have informed me that girls' toilets in secondary schools in Angus are being locked during the school day, which is denying girls their legal right to single-sex spaces. That, as the cabinet secretary has just outlined, is illegal. What immediate steps is the Scottish Government taking to ensure that every girl in every school has unrestricted access to single-sex toilets, as required by the law?

Jenny Gilruth: I thank Tess White for raising that point. I am not sighted on the specifics

relating to Angus Council, but I will go back to my officials in relation to toilets being locked during the school day. More broadly, she will be aware of the guidance that we published last week following the Supreme Court ruling. That guidance is intended to bring clarity to the teaching profession and to young people in our schools and was our response to the Supreme Court ruling. I am more than happy to take away the specific issue that she has raised.

Rona Mackay (Strathkelvin and Bearsden) (SNP): I welcome the engagement that the Scottish Government has undertaken with parents and carers, education representatives, LGBT organisations and women's organisations to develop the recent guidance. Will the cabinet secretary provide more detail about how that will ensure that support for trans children continues in schools?

Jenny Gilruth: The purpose of the guidance is to support our councils and schools in their support for transgender pupils. We know that those matters are really complex and that education authorities will continue to consider the wellbeing of all their pupils, including transgender pupils, as they navigate the support that is required in schools.

The guidance offers advice on legal, policy and practical matters and draws together the signposting of support for parents and carers and for young people. It recognises that those highly personal decisions can be challenging for young people and their families, and for councils and schools, to navigate. The guidance seeks to provide support to those working in our schools as they navigate that complex issue for all.

Further and Higher Education (Financial Situation)

2. Richard Leonard (Central Scotland) (Lab): I welcome the minister to his new position.

To ask the Scottish Government what action it is taking to address the reported jobs and cuts crisis in further and higher education. (S6O-05051)

The Minister for Higher and Further Education (Ben Macpherson): I thank Richard Leonard for the warm welcome and express to him that the Scottish Government values and works to support all those who work in further and higher education in our country. I have valued the opportunities to express that since coming into post less than a month ago.

Our most recent budget allowed the Scottish Funding Council to increase revenue funding to colleges by 2.6 per cent and funding to universities by 3.3 per cent. However, we recognise the pressures that both sectors face, which have been set out clearly by Audit Scotland and the Scottish

Funding Council. My ministerial colleagues and I will continue to work collaboratively on those challenges with both sectors and with the Parliament.

Richard Leonard: The Alloa campus of Forth Valley College remains under threat. The principal told me this week that

“Without intervention the college is forecast to run out of cash by December 2026 and would become insolvent”.

In a written answer last week, the minister told me that the closure of the Alloa campus was “ultimately ... an operational matter” for the college. If it is not the job of the minister for further education to defend access to further education in one of our most deprived communities, I do not know what his job is, so will he give an assurance to Parliament and to the people of Clackmannanshire, this afternoon, that the Alloa campus will not be downgraded and will not be closed?

Ben Macpherson: I thank Richard Leonard for his engagement on the matter. In relation to the Alloa campus, I have valued questions from members across the chamber, including from Keith Brown last week, who have advocated on behalf of the campus.

We recognise that, as has been set out, including in the Audit Scotland report this week, colleges are anchor bodies in communities. The Alloa campus plays an important role in helping young people and others in Clackmannanshire to fulfil their potential, build their skills and contribute fully.

The Scottish Government is engaged on the issue, as members would expect. Ministers are regularly being updated on the matter and, crucially, the Scottish Funding Council is engaged with Forth Valley College on the Alloa campus. We will continue to update the Parliament as appropriate, and we will continue our proactive engagement with the Scottish Funding Council.

Miles Briggs (Lothian) (Con): The Audit Scotland report is not only a wake-up call for ministers; it should act as an alarm bell for them. Scotland’s colleges face a dire financial future under this Government. After a decade of dire public warnings from colleges and others about their future, what future funding models and new funding models will the Scottish Government bring forward to save our colleges?

Ben Macpherson: Following the Audit Scotland report last week, and prior to that with regard to the Scottish Funding Council reports, we have collectively discussed in the Parliament, and at length, the importance of colleges as anchor institutions, which I mentioned earlier, and the roles that they play in enhancing skills, creating a

fairer society and providing locally accessible learning facilities.

As well as appreciating my engagement with the Parliament so far, I welcome the positive engagement that I have had with Colleges Scotland, as the body that represents colleges. I had a really good visit to Kelvin College in Glasgow earlier this week. We need to have engagement with the college sector on sustainable funding, and we look forward to having that further engagement in the weeks and months ahead. I look forward to my next meeting with Colleges Scotland and discussing how we can collectively bring everyone with an interest round the table to ensure that we support our colleges and provide sustainable funding into the future.

The Deputy Presiding Officer: Thank you, minister. We are going to need a little more brevity in responses.

Energy Transition Skills and Qualifications (Aberdeen)

3. Jackie Dunbar (Aberdeen Donside) (SNP):

To ask the Scottish Government what discussions the education secretary has had with ministerial colleagues regarding how to support people in Aberdeen to gain the skills and qualifications needed for the energy transition, to ensure that north-east Scotland has a world-leading workforce. (S6O-05052)

The Minister for Higher and Further Education (Ben Macpherson): The cabinet secretary maintains regular communication with Cabinet colleagues on matters of importance to the Government, including supporting people in Aberdeen and elsewhere to gain the skills for the energy transition in the north-east, which is a key priority. We will continue to work with regional partners to help to ensure that the workforce is equipped for the opportunities ahead. Targeted funding is already in place to support skills for the energy transition, in recognition of high demand, and colleagues and I will continue to engage with all partners, including Jackie Dunbar, in this shared endeavour.

Jackie Dunbar: It is hugely important that we harness the potential of our young people and workers who are needed for the energy transition and that we assist in facilitating pathways to success. Does the minister share my view that cross-sector joint working is crucial to achieving that objective?

Ben Macpherson: We are committed to boosting skills among Scotland’s young people, especially in vital sectors such as those relating to the energy transition. Although we pursue long-term reform of post-school education and skills, we recognise that there is an urgent need to meet

current demands. That is why we are providing targeted funding to colleges in 2025-26 for an offshore wind skills programme. That will create training hubs to build the skilled workforce that is needed for our offshore wind ambitions and will support the upskilling and reskilling that will aid energy transition. The funding enables new courses to be provided, strengthens college staff capacity and invests in facilities across strategically important regions for the offshore wind industry.

In addition, alongside the United Kingdom Government, we are providing up to £2 million of funding to Forth Valley College to support workers at Grangemouth to transition into those key sectors.

Higher History (Fluctuation in Results)

4. Douglas Ross (Highlands and Islands)

(Con): To ask the Scottish Government for what reason it considers the percentage of students earning an A, B or C in higher history fluctuated by 27.6 per cent between 2023 and 2025. (S6O-05053)

The Cabinet Secretary for Education and Skills (Jenny Gilruth): There are always year-on-year fluctuations in pass rates in both directions for individual courses. The Scottish Qualifications Authority has worked in partnership with history teachers to develop and deliver an enhanced and well-received understanding standards programme. Following the 13 per cent dip last year, I was pleased to see that the pass rate improved by 14.6 per cent this year.

The SQA quality-assured awarding process, which includes grade boundary checks, confirmed that the assessments worked as intended and that the national standard was consistently applied. Candidates can be confident that their results in both years reflect the hard work and achievement.

Douglas Ross: I am sorry, but I do not think that candidates can be confident. The SQA's internal review of the 2024 higher history exam blamed the students, yet we now see the exam results back up to pre-2024 levels. Does the cabinet secretary not accept that that means that the SQA's review—a review that she wholeheartedly supported—was wrong? Does she understand that students who got lower-than-expected grades in 2024 feel a sense of injustice and that their marks were not sound?

Jenny Gilruth: I thank Mr Ross for his interest in this matter. We have discussed it at length in front of his committee, but I want to put on the record and reassure him that I pressed the issue with previous management at the SQA on no less than three occasions. Of course, there has also

been an independent report into the processes that were applied.

It is worth recounting, however, that pass rates vary year on year. I can cite other examples, such as that the national 5 graphic communications pass rate fell from 74.2 per cent in 2023 to 64.8 per cent in 2024, and then it increased again to 76.7 per cent in 2025. There will always be variations.

There were issues in relation to higher history last year—I accept that—and the SQA took a number of different actions in that regard, not least in relation to the support to the profession, but also through additional support for teachers of higher history and markers being put in place. The markers' report was also reviewed and updated. The markers' report is important, because it looks at the national standard and identifies strengths and weaknesses in performance. Markers were given the form earlier this year so that it could be used by all markers who are undertaking coursework and question paper marking in 2025. It is also a matter of public record that the SQA carried out an independent review that looked into the matters in detail at that time.

Paul McLennan (East Lothian) (SNP):

Although the Opposition looks to discredit the dedication of Scotland's students through persistent negativity about Scotland's schools, this year's SQA results showed record levels of achievement. Can the cabinet secretary speak further on the overall performance of Scotland's schools, notably in relation to the narrowing of the poverty-related attainment gap? [*Interruption.*]

Jenny Gilruth: I can hear someone to my left muttering the word "shameful", but I thank Paul McLennan for highlighting the achievements of our young people in Scotland this year, which have been remarkable. A record number of vocational and technical qualifications were achieved, and pass rates for nat 4, nat 5, higher and advanced higher were up compared to last year. The poverty-related attainment gap has also narrowed for nat 5, higher and advanced higher when compared to last year. We also had 95.7 per cent of school leavers in initial positive destinations in 2024, which is our second-highest level ever. Of course, there is more work to do, particularly in relation to the attainment gap, but I certainly welcome the progress that we have seen this year in relation to our exam results.

Education (Highlands and Islands)

5. Jamie Halcro Johnston (Highlands and Islands) (Con):

To ask the Scottish Government what challenges are faced by those delivering education across the Highlands and Islands. (S6O-05054)

The Minister for Children, Young People and The Promise (Natalie Don-Innes): The statutory responsibility for delivering education lies with local authorities, and we recognise the unique challenges that are faced by those in the Highlands and Islands. We are actively engaged with councils and stakeholders in the region. I have met Highlands and Islands Enterprise to discuss rural childcare accessibility. The cabinet secretary and ministerial colleagues have also visited to hear directly from communities.

The forthcoming national islands plan and rural delivery plan will include education as a strategic priority. Those plans aim to ensure that communities have a genuine voice in decisions that affect local education provision and ultimately improve outcomes for learners.

Jamie Halcro Johnston: In January last year, my Conservative colleague Councillor Helen Crawford presented a motion to the Highland Council calling on it to declare a school estate emergency, based on the fact that it has the poorest school estate in Scotland. The council's Scottish National Party-led administration refused to do so.

More than one third of Highland schools are now classed as being in a state of disrepair, with 53 primaries and 11 secondaries falling below acceptable standards. Given that clear neglect of rural education, can the minister explain why—after 18 years of Government—the SNP is still failing to deliver safe and efficient learning environments for Highland pupils?

Natalie Don-Innes: First, it is the statutory responsibility of local authorities to manage their school estate. We are aware that some schools in the Highland Council and Moray Council areas are in an unsatisfactory condition. Two of the D condition schools in the region—Forres and Nairn academies—are being replaced through the learning estate investment programme. There are plans from each council for the other two D condition schools—Charleston and Alves. We will continue to work with the Convention of Scottish Local Authorities, local authorities and the Scottish Futures Trust to explore how we can deliver further improvements.

The Deputy Presiding Officer: With a reminder that the substantive question is around education access in the Highlands and Islands, I call Jamie Hepburn.

Jamie Hepburn (Cumbernauld and Kilsyth) (SNP): Will the minister set out how Scottish Government schemes, such as the preference waiver payment, assist in overcoming any challenges in education associated with geographical location?

Natalie Don-Innes: The Scottish Government recognises the challenges that are posed by geographical location in delivering education, particularly in remote and rural areas. The preference waiver payment is an incentive to attract newly qualified teachers to more remote and rural local authorities that experience difficulties in securing probationers.

Currently, the PWP is £6,000 per annum for primary teachers and £8,000 per annum for secondary teachers, and it is paid in addition to the probationer's salary. It is complemented by the remote schools allowance and targeted funding to protect teacher numbers. Those measures all form part of a broader strategy, including the forthcoming national islands plan and rural delivery plan, which I have already mentioned. Together, those initiatives support equitable access to high-quality education across all parts of Scotland.

Bullying (Schools)

6. Douglas Lumsden (North East Scotland) (Con): To ask the Scottish Government what its response is to recent reports of a rise in recorded bullying incidents in schools. (S6O-05055)

The Cabinet Secretary for Education and Skills (Jenny Gilruth): I have made it clear that I expect all incidents of bullying to be recorded and that, with more rigorous recording, the number of recorded incidents will likely increase. That reflects a crucial part of our on-going commitment to transparency, ensuring that every allegation is taken seriously and that all children and young people are properly supported.

To support schools, we published updated national anti-bullying guidance in November of last year, which includes guidance on recording and monitoring. We also continue to fully fund respectme, Scotland's anti-bullying service, to build confidence and capacity to address bullying effectively.

Douglas Lumsden: With more than 64,000 bullying incidents logged in just five years and growing reports of violence against teachers, it is clear that violence and intimidation are becoming routine in Scotland's schools. Does the cabinet secretary agree with the First Minister's claim yesterday that the Scottish National Party Government has not failed in education, when it is evident that it is failing to protect pupils and staff from harm?

Jenny Gilruth: Douglas Lumsden might be interested in a report by His Majesty's Inspectorate of Education that was published in early 2023, which looked at the quantum of bullying incidents that have been recorded and noted that only two thirds of our schools recorded bullying incidents

effectively. We therefore know that a number of schools currently do not recording bullying incidents.

In my time as education secretary, I have been clear that we want all schools to record all incidents and allegations. We need to have a clear national picture. In doing that, I accept and recognise that it might lead to an increase in the number of incidents that are recorded, but it is important to have that information to inform our support to our schools. That has been done primarily from an education perspective, driven through the national action plan on behaviour and relationships, which has been co-produced with local authorities and our teaching trade unions. It has been hugely important to have co-operative partnership working on this really important issue in our schools.

Colin Beattie (Midlothian North and Musselburgh) (SNP): Bullying is categorically unacceptable in Scotland's schools and in our society. Will the cabinet secretary provide details of engagement with teachers and parents, who interact with our young people day in, day out, in shaping guidance on responding to challenging behaviour?

Jenny Gilruth: I engage with parents and teachers on a regular basis. This morning, I met the headteacher panel and, earlier this week, I was in Orkney meeting parents and carers and listening to some of their concerns at the current time.

We published the guidance, "Fostering a positive, inclusive and safe school environment", to support our school staff in relation to challenging behaviour. As I have set out previously, the Scottish advisory group on relationships and behaviour in schools includes representatives from our teaching unions and Connect, our parent organisation, which has been hugely important in providing the oversight and necessary experience in the development of the guidance.

Widening Access (Universities)

7. James Dornan (Glasgow Cathcart) (SNP): To ask the Scottish Government what progress it has made in further widening access to university education for people in the most disadvantaged communities. (S6O-05056)

The Minister for Higher and Further Education (Ben Macpherson): The number of Scots from the most deprived areas who enter university has increased by 37 per cent since the Scottish Government established the commission on widening access, and the latest Universities and Colleges Admissions Service statistics show that record numbers of young Scots from deprived

areas were accepted to study at university in 2025.

However, we know that there is more to do. We will continue to work with the sector, and with the commissioner for fair access, to make further progress on fair access to higher education. That includes our on-going exploration of data-sharing options to better support disadvantaged individuals and communities.

James Dornan: Will the minister set out how the support that is available for mature and care-experienced students to access and succeed in university compares with that in other United Kingdom nations? What assessment has the Scottish Government made of the effectiveness of those measures in reducing inequalities in higher education?

Ben Macpherson: I thank the member for raising those important matters. The Scottish Government continues to provide unparalleled support to care-experienced students in the form of a non-means-tested bursary of £9,000—the first of its kind in the UK. All of Scotland's universities are committed to guaranteeing a university place to care-experienced applicants who meet minimum entry requirements. I am proud that there has been an increase in care-experienced students attending university every year since 2016. Support for mature learners is also a priority, and we continue to fund the Scottish wider access programme, which supports thousands of learners to return to higher education each year.

Pam Duncan-Glancy (Glasgow) (Lab): Although entry numbers have increased, course completion is still a problem. The most recent figures show a retention rate of 86.1 per cent for students from the most deprived communities versus 92.1 per cent for those from the least deprived. There is now a gap of six percentage points, which is up from a gap of 4.5 percentage points 10 years ago. Does the minister agree that getting into university or college is not enough? We must support students to complete their courses. If he agrees, how does he think that cuts to discretionary funds and to student mental health support will impact widening access?

Ben Macpherson: The member is right that we need to support people through their journey. That is why provision through the Scottish loan system and Student Awards Agency Scotland support is significant and makes an important difference for people throughout their journey.

As I said in my first answer, I appreciate that there is more work to do. We have made a lot of progress since 2016, and I would be pleased to engage with Pam Duncan-Glancy on those points as we collectively try not just to enhance the opportunities of people going to university but to

help them to complete their journey and succeed thereafter.

Jamie Halcro Johnston (Highlands and Islands) (Con): The latest figures show that University of Highlands and Islands student numbers have fallen by 6,000. UHI has faced a number of challenges, including mergers, staff cuts and, of course, the funding issues that have plagued the sector in the past 18 years. What impact does the minister think that that will have on the disadvantaged and often remote communities across my Highlands and Islands region?

Ben Macpherson: I have welcomed engagement on UHI since coming into post, including from Jamie Halcro Johnston and the members who are sitting behind him. The provision across the Highlands and Islands, which is, of course, a wide geographical area, is extremely important for those communities and for the country more widely.

It is important to recognise that, when students go to a university in Scotland, their fees are paid for by the Government—by the taxpayer. That helps people to access those opportunities. There is a situation, as set out by the Scottish Funding Council, with regard to the sustainable funding of the sector, and I spoke earlier about how we are engaged in that and how we engage with Universities Scotland.

Youth Work (Budget Decisions)

8. Martin Whitfield (South Scotland) (Lab): To ask the Scottish Government what assessment it has made of the impact on youth work provision of its budget decisions, in light of the most recent YouthLink Scotland survey indicating that the majority of young people accessing youth work do so through the voluntary sector. (S6O-05057)

The Minister for Higher and Further Education (Ben Macpherson): As Parliament knows from contributions that I have made previously, I highly value youth work, and I am looking at ways to provide further support. At present, the Scottish Government funds youth work provision in a variety of ways, most prominently through local authority block grants, which give councils significant autonomy to provide youth work in their area.

Martin Whitfield: I am aware that the minister genuinely values youth work. When I launched my proposed youth work (Scotland) bill at the Citadel Youth Centre in Leith, I saw first hand how transformative voluntary provision can be and, indeed, how the minister takes interest in that place. However, YouthLink's latest survey shows that the majority of young people who access youth work do so through voluntary organisations,

and that many such organisations are struggling to meet rising demands. What are the minister's specific plans to strengthen voluntary and statutory provision so that no young person misses out?

Ben Macpherson: I am looking forward to engaging with the youth work sector in my role and will be doing so in the weeks ahead. The member speaks about youth work in terms of preventative spending and its power to help young people to realise their potential, which allows them to contribute more to society and the economy. I believe in that deeply, and I see it in my local constituency through organisations such as the Citadel Youth Centre. I have forgiven the member for not inviting me to the launch of his bill in my constituency in Leith.

Although I not dismissing the considerations around the need for primary legislation, most important, we must consider the current needs in communities, which I am engaged with. We have provided a lot of additional resource—more than £1.1 billion in 2025-26, which is a real-terms increase of 5.5 per cent—to local authorities. Without disrespecting the Verity house agreement, we need to consider whether local authorities are investing enough in youth work and what other ways we can provide additional youth work support where there is need and demand, given the current circumstances.

The Deputy Presiding Officer: I can squeeze in a very brief supplementary question.

Bill Kidd (Glasgow Anniesland) (SNP): Is there anything else that the minister can say about the role of local authorities in allocating resources for youth work?

Ben Macpherson: I recognise that local authorities have significant resource and a responsibility to invest in youth work. We are investing through other avenues where we can, including through Youth Scotland and YouthLink Scotland. We have invested £2 million since 2023 through community-based national youth work organisations. I will continue to consider how central Government, working with local government, while respecting the Verity house agreement, can support the important contribution that youth work makes to our communities.

The Deputy Presiding Officer: That concludes portfolio questions. There will be a brief pause before we move to the next item of business to allow front bench teams to change position.

Youth Mental Health Support

The Deputy Presiding Officer (Liam McArthur): The next item of business is a statement by Tom Arthur on youth mental health support. The minister will take questions at the end of his statement, so there should be no interventions or interruptions.

14:27

The Minister for Social Care and Mental Wellbeing (Tom Arthur): My statement concerns the lasting legacy of the youth commission on mental health services, which reported in 2019. I begin by thanking Young Scot, Scottish Action for Mental Health and the Children and Young People's Commissioner Scotland for their recent report detailing the progress against the commission's recommendations. The opportunity to give my statement today is therefore very timely.

The youth commission's work remains at the heart of the Government's approach to children and young people's mental health and wellbeing. The commission was part of a sea change in how we think about support for children and young people's mental health. The commission's primary theme was that support should be available across the whole system at all levels of need, which is a principle that is at the core of our current mental health and wellbeing strategy. The strategy sets out our shared vision of a Scotland that is free from stigma and inequality, where everyone, including children and young people, fulfils their right to achieve the best mental health and wellbeing possible. I believe that that reflects the youth commission's ambition for children and young people's mental health.

That includes the strategies that focus on the three Ps—promote, prevent and provide. It is clear that the commission was a catalyst for so much of the change that we have seen across the system in the intervening years. I will give some examples shortly. The commission was a great example of young people directly driving meaningful improvements on the issues that matter to them. On that note, I give my heartfelt thanks to the many young people who shared their personal experiences. They demonstrated tenacity, candour and passion to improve the services that they access. Their work, and that of the many young people who followed them in sharing their views and experiences, continues to influence policy six years after the report was published. Therefore, I hope that the members of the commission are very proud of what they achieved.

We accepted the vast majority of the 103 recommendations that were made by the

commission. However, as the new progress report acknowledges, the landscape has changed significantly over the past six years. The time between then and now spans two parliamentary terms. In that time, we have had a global pandemic; national health service spend on mental health has increased dramatically; and we have published two national strategic mental health documents—I could go on.

The latest report highlights the difficulty of reporting progress against previous recommendations that have themselves resulted in huge change. That is why I want to focus my statement on the commission's lasting legacy. It is only right that we reflect on its achievements, and I would like to do so with reference to each of the commission's five key themes.

The first theme focused on services. The recommendations directly influenced the development of the service specification for national child and adolescent mental health services, which was published in 2020 and outlined the standard of support that young people and their families are entitled to expect from the national health service. Key principles of the specification include equity of access and a needs-led and rights-based approach that is aligned with the getting it right for every child policy.

In recent years, we have invested significantly in CAMHS improvements and continue to work with health boards to closely monitor implementation of the specification. In line with the commission's recommendations, the service specification states that CAMHS must work in partnership with children, young people and their families in all aspects of service design and delivery, including transition planning.

We have also seen considerable improvements in CAMHS waiting times. The 18-week standard has now been met for the third quarter in a row, with 91.8 per cent of children and young people starting treatment within 18 weeks of referral. Local CAMHS teams continue to respond well to demand, with one in two children and young people who are referred to CAMHS starting treatment within five weeks, compared with 12 weeks in the period before the pandemic. That is the result of sustained investment by the Scottish Government and, even more importantly, the continued hard work of our amazing CAMHS workforce.

CAMHS staffing levels have increased by 54.3 per cent in the past decade under this Government. We have also exceeded our commitment to provide funding for 320 additional staff in CAMHS by 2026, increasing case capacity by more than 10,000.

The commission's second theme—education—called for a whole-school approach. We have ensured access to counselling services in secondary schools across the country, and continue to support local authorities with £16 million every year. We have also published a whole-school approach framework to assist in supporting children and young people's mental health in schools.

The third theme called for more community-based approaches to support mental health. We know that not all children and young people who need support will require a specialist service such as CAMHS. That is why, since 2020, we have provided local authorities with more than £80 million to fund community-based mental health support for children and young people, including £15 million a year in baseline funding from 2025-26. Community-based supports are now available in every local authority area, and councils report that such support was accessed by nearly 80,000 people in 2024-25.

Young people aged 16 and over can also access projects that are supported by our communities mental health and wellbeing fund for adults. We have invested £81 million in that fund since 2021, with a further £15 million committed for 2026-27 through our third sector fairer funding pilot.

Our substantial investment in community-based support brings me to the commission's next theme: finance, policy and rights. As I mentioned earlier, NHS mental health expenditure has risen substantially in recent years, from £1.3 billion in 2022-23 to £1.49 billion in 2023-24. Despite facing the most challenging financial situation since devolution, we have doubled the direct programme budget for mental health since 2020-21, allowing us to build on the improvements that we have made in early intervention and prevention, as well as clinical support.

Again, let me be unequivocally clear: the mental health budget for 2025-26 remains at £270.5 million. Between the Scottish Government and NHS boards, we expect spending on mental health to be around £1.5 billion in 2025-26.

The commission's report emphasised the importance of young people being at the centre of decision making and being supported to understand their rights. That principle of meaningful participation is central to the adoption of a children's rights-based approach and is a guiding general principle of the United Nations Convention on the Rights of the Child.

Scotland is the first country in the United Kingdom, and the first nation in the world, to incorporate the UNCRC into domestic law, within the limits of devolved competence, providing legal

protection for children's rights. Further building on the legacy of the commission, we continue to ensure that the voices of children, young people and those with lived experience are central to policy development, for example through our child and family mental health joint strategic board and a youth reference group that supports our work on suicide prevention.

In its final theme, the commission rightly acknowledged the need to train the workforce to better meet the needs of children and young people. Our mental health and wellbeing workforce action plan sets out a range of actions to address key workforce issues, including training. In 2025-26, we provided NHS Education for Scotland with over £30 million to continue multidisciplinary education, training and support of workforce expansion, including for CAMHS.

Despite the substantial progress that I have set out, we are not complacent. I acknowledge that we have much more to do. That is why we are working with partners to refresh our mental health and wellbeing delivery plan. The next delivery plan is scheduled for 2026 and will contain a focused selection of strategic actions that will enable us to make significant progress towards our overall vision for health and social care reform. I want the delivery plan to show a clear and tangible contribution not only to the mental health and wellbeing strategy, but to the service renewal framework, the population health framework and the NHS Scotland operational improvement plan.

I also recognise the importance of ensuring that the Government learns from our incredibly valuable partners who are working on the ground and in communities. For example, I know that SAMH is shortly to open its nook network hub in Glasgow, which will be an integrated, community-based site that brings together stakeholders from across the city and will be open to people aged 10 and up. I very much look forward to visiting the nook hub and learning from the innovative approach that SAMH is taking.

Finally, I will touch briefly on neurodevelopmental support, following on from my statement to Parliament in June. Although I recognise that neurodivergence is not a mental health condition, I want to reaffirm that we are continuing to take action to support people with neurodevelopmental needs. Improving support for children and young people is a long-term commitment. Although we are still at the early stages of that work, we are providing funding of £500,000 this year to improve ND assessment and support for children and young people. In conjunction with the Convention of Scottish Local Authorities, we have undertaken a review of the implementation of a national neurodevelopmental specification. That will inform improvements to

ensure that health boards and local authorities are delivering the specification in full. We have also established a new cross-sector neurodevelopmental task force, which met for the first time on 2 October. It will be key to taking forward the actions that are identified in the review.

I end by reminding colleagues that tomorrow is world mental health day, which makes this an ideal time to reflect on the progress that we have made and the work that we still have to do. I again give my thanks to the youth commission members and to SAMH and Young Scot. The lasting legacy that they have created continues to drive our approach to children and young people's mental health and wellbeing.

I look forward to members' questions.

The Deputy Presiding Officer: The minister will take questions on the issues raised in his statement. I intend to allow around 20 minutes for questions, after which we will need move to the next item of business. I encourage members who wish to ask a question to press their request-to-speak buttons.

Brian Whittle (South Scotland) (Con): I thank the minister for early sight of his statement.

The rise in poor mental health among children is one of the most concerning health issues that we face in Scotland, even in an environment in which poor health outcomes are too common. Scotland has had a significant spike in the need for CAMHS services, along with a massive jump in attention deficit hyperactivity disorder, autism and neurodivergence referrals. We even have situations in which health boards cannot disaggregate CAMHS numbers from neurodivergence numbers. That cannot be allowed to continue. How can we solve an issue if we do not understand the problem?

We also have a third sector, which we rely on heavily, that is on its knees. Many essential mental health services that it provides are in danger of disappearing, further exacerbating the pressure on our statutory services.

Last week, I was at the launch event for Voluntary Health Scotland's manifesto, the key theme of which is prevention. We need significantly better interaction between the third sector and statutory services, with an emphasis on prevention.

It is great that councils have more money, but what assessment has the Scottish Government made of what is happening on the ground? Many leisure centres, pools and community halls have shut because of a lack of local government funding. Those spaces provide front-line support

services for our kids by offering, first, inclusion and, secondly, an outlet.

The commission on mental health services made its recommendations in 2019 but, last month, the children's commissioner said:

"evidence of progress by the Scottish Government in many areas is seriously lacking."

What guarantee do we have that the Government will finally deliver after six years?

The children's commissioner also highlighted that the Scottish Government had made a key commitment that at least 1 per cent of NHS funding should go towards young people's mental health services, which has not been fulfilled. Will the minister commit to delivering that promise by the end of the parliamentary session?

Tom Arthur: I will take each of Brian Whittle's questions in turn. He referred to the impact on the ground. As I touched on, since 2020, £860 million has been invested in community mental health services from two funding streams: one for children and young people and another for adults. As I said in my statement, the funding for children and young people has been baselined into local government funding.

Around the inception of that funding, a framework was published that set out the types of interventions that it would help to support and the vision for community mental health support. The evidence that we have seen to date—the number of organisations that have been able to secure funding and deliver projects on the ground locally, and the point that I made about around 80,000 people receiving support in the last year for which we have data—demonstrates the significant impact of that funding. Of course, we continue to engage with partners and local government to understand what further action can be taken.

On the point about progress on the commission's recommendations, as the commission's report acknowledged, and as I touched on in my statement, there has been a sea change over recent years—not least because of the impact of the Covid pandemic—and a second mental health and wellbeing strategy has been introduced. The actions that I have set out demonstrate that the commission's core recommendations, which the Government accepted either outright or in principle, have strongly informed our strategic position and the actions that are being taken forward via the delivery plan.

With regard to the point on CAMHS spending, we recognise the commitments that Mr Whittle mentions and are resolved to work constructively with our partners to ensure that we can deliver on the commitment for 1 per cent of NHS funding to

go to CAMHS and, indeed, on the commitment for spending on mental health services to increase to 10 per cent of the total NHS front-line budget.

Paul Sweeney (Glasgow) (Lab): I thank the minister for advance sight of his statement.

We all agree that the current system for young people who seek mental health support is broken and must be transformed. I came to the Parliament from the Bipolar Scotland conference held in Edinburgh this morning, where there was broad agreement that prevention is often ill recognised and poorly resourced, particularly because of irrational and incoherent decisions made by integration joint boards in allocating budgets.

At First Minister's question time, the First Minister told me that the Government was on track to meet its commitment to spend 10 per cent of the national health service budget on mental health services by the end of this parliamentary session. Does the minister agree with the First Minister that that will be achieved, and is he willing to be held to account for that commitment?

Tom Arthur: The First Minister set out clearly what action the Government is pursuing and that we are on track to achieve the goal that he mentions. As I stated when responding to questions on my statement in June, I made a commitment that we would work constructively with health boards to support that delivery because, as Paul Sweeney will be aware, there is variation across health boards in the total percentage of resource that is allocated for mental health services. I again commit to working constructively with health boards to achieve it.

Mr Sweeney made a point about prevention. That is absolutely important. It is the heart of the population health framework and, indeed, a core component of our mental health and wellbeing strategy, which seeks not only to promote positive mental wellbeing but to prevent crisis and need and, where they develop, to be able to provide the required support.

Jackie Dunbar (Aberdeen Donside) (SNP): Will the minister say a bit more about the steps that the Scottish Government is taking to deliver improvements across waiting lists for youth mental health services?

Tom Arthur: We are taking a number of actions. As I touched on in my statement, there has been significant investment in resource over the past decade. There has been a rise in CAMHS staffing in excess of 54 per cent as well as significant increases in our mental health budgets. That is reflected in the CAMHS performance statistics, with the national target being exceeded for the third consecutive quarter and the median

wait for people to begin treatment after referral being five weeks.

Annie Wells (Glasgow) (Con): Glasgow families have been left deeply concerned by the closure of the Notre Dame children's centre earlier this year. That service supported some of the city's most vulnerable young people. How can the minister claim real progress when trusted community-based services such as that centre are closing their doors due to funding pressures? It leaves children without the help that they desperately need.

Tom Arthur: I recognise the importance of the issue that Annie Wells has raised. Other members will have concerns with regard to locally made decisions that are taken under the existing statutory frameworks. The Government is committed to ensuring that we engage constructively with partners. This year, we have allocated record funding for our health boards and local government. As I touched on earlier, over the past five years, we have provided £160 million for community-based mental health services.

Evelyn Tweed (Stirling) (SNP): The transition from child to adult mental health services can be a worrying time for both young people and their parents or carers. What assessment has been made of the support that is required for those who are transitioning from youth mental health services to adult mental health services?

Tom Arthur: The question of transitions is extremely important. Providing transitional support was one of the recommendations in the commission's original report. That report followed the 2018 publication of the transition care plan guidance that informs our CAMHS approach. There is flexibility, in that when a young person reaches 18 years of age it does not necessarily mean that they move immediately to adult mental health services. The point for such a move can vary between the ages of 18 and 25 in response to the specific needs of the individual or young person. That flexibility is included within the national standard. It is for local partners to ensure that that is being delivered.

Pam Duncan-Glancy (Glasgow) (Lab): I thank the minister for advance sight of his statement. It will be disappointing to young people with ADHD across Glasgow and their parents that he mentioned issues that relate to ADHD only at the end of his statement and, even then, in very broad terms.

A constituent in Glasgow has struggled to be assessed for ADHD for almost two decades. Her assessment was first requested in 2008, when she was a young child, and she has spent the intervening years being passed from pillar to post. She is not alone. Current waiting times mean that

people who are assessed this week are likely to have waited more than three years to be assessed, leading to a lifetime of uncertainty with untold consequences. What is the minister going to do to urgently ensure that there is a timely pathway for support and diagnosis for young people with ADHD?

Tom Arthur: I recognise the primacy and importance of that issue. That is why I set out the actions that the Government is undertaking in a substantive statement to the Parliament prior to summer recess, in which the substance of my remarks focused on responding to the youth commission report. However, I felt that it was important to provide a further update to the Parliament on the work that we are doing on support, assistance and assessment for neurodevelopmental conditions.

We recognise that, to use the words of the Royal College of Psychiatrists in Scotland, we are contending with an

“unprecedented increase in the number of people”

who are coming forward, which was “unforeseen”. Scotland is not alone or unique in facing this challenge; it is shared by our colleagues elsewhere in the UK and in many other countries.

To reiterate my points, we have a national specification that sets out the standards and expectations for partnership working at the local level, and we recognise that there have been implementation challenges—hence the review of implementation and the establishment of a cross-sector task force. I would be more than happy to keep Pam Duncan-Glancy up to date on that work. We have a forthcoming cross-party summit to discuss those matters further.

Clare Haughey (Rutherglen) (SNP): I remind the Parliament that I am employed as a bank nurse by NHS Greater Glasgow and Clyde.

Having adequate staffing levels is key to ensuring the provision of high-quality services. Will the minister provide an update on current CAMHS staffing levels and on the Scottish Government’s work to invest in our mental health workforce?

Tom Arthur: As I touched on earlier, there has been significant investment. Staffing has increased by more than 54.3 per cent to 1,510.9 whole-time-equivalent posts. We have exceeded our commitment to provide funding for 320 additional staff in CAMHS by 2026, which has increased capacity for cases by more than 10,000. We have also provided NHS Education for Scotland with more than £30 million in 2025-26 to continue multidisciplinary education and training and to support workforce expansion.

Ariane Burgess (Highlands and Islands) (Green): Will the minister clarify how children and

young people from marginalised or rural backgrounds are being included in the youth reference groups and strategic boards that are shaping mental health policy?

Tom Arthur: My clear expectation and intent is that our work in policy development should reflect the whole range of Scotland’s population, including those in different geographies, and should include consideration of issues that pertain to rurality. I am happy to follow that up in writing to provide Ariane Burgess with more specific detail.

Jamie Greene (West Scotland) (LD): If neurodevelopmental assessment waiting times were absorbed into CAMHS waiting times, the Government would miss every single one of its targets. The Scottish Parliament information centre tells us that more than 42,000 children are waiting for an assessment. The average waiting time is 76 weeks, which is a year and a half. Some people are waiting four, five or even six years for an assessment. That is outrageous, atrocious and, frankly, shameful. When will we achieve parity and consistency of access across all local authorities and all health boards, so that every child in Scotland, no matter where they live, has access to diagnosis and the treatment and support that they rightly deserve?

Tom Arthur: The first point that I will make is that a neurodevelopmental condition is not a mental health condition, so to suggest that those seeking a neurodevelopmental assessment should be in CAMHS is completely incorrect. Child and adolescent mental health services are there, but we are talking about acute specialist services for acute mental illness. If a person is assessed as having a neurodevelopmental condition, that does not make them mentally unwell. That is an important point to make. If someone with a neurodevelopmental condition has a comorbid mental health condition, CAMHS might be the appropriate pathway. However, it is important to make that distinction when we are discussing this matter.

Secondly, if Jamie Greene has not had the opportunity to consider the paper that the Royal College of Psychiatrists in Scotland published last week, I strongly recommend reading it. In discussing a diagnosis-led response and the mental health system, it makes the point that no mental health system in the world could respond to the unprecedented and unforeseen increase in the number of people seeking assessment and diagnosis. The paper recognises that we need a whole-system, whole-society approach, which is what we are absolutely committed to delivering.

With regard to children and young people, which the substance of my statement was concerned with, I have already set out the work that we are doing through the national specification and the

cross-sector task force that has been established. I look forward to engaging with Jamie Greene at the cross-party summit.

Jamie Hepburn (Cumbernauld and Kilsyth) (SNP): What steps are being taken to ensure equality of access to services across different health board areas, so that young people can benefit from high-quality services irrespective of where they live in the country?

Tom Arthur: That is a really important point, and I recognise that there is still variation. The national specification was published some five years ago, and we have seen strong progress among the overwhelming majority of health boards. Where there are still challenges, the Government and officials work closely with health boards to address them. I give the commitment to members that that is what we will continue to do.

Alexander Stewart (Mid Scotland and Fife) (Con): The statement indicates that there has been considerable improvement in CAMHS waiting times. However, some children are waiting as long as three years to access mental health support through the NHS, which is clearly unacceptable. What guarantees can the Scottish Government give that today's announcement will result in waiting times being cut, or will we continue to leave our children behind?

Tom Arthur: Long waiting times are not acceptable. In my statement and in response to questions from other members, I have highlighted the strong performance that we have seen in CAMHS—the 90 per cent target has now been exceeded for three consecutive quarters, and the median waiting time between referral and start of treatment is down to five weeks, compared with 12 weeks before the pandemic. That reflects not only significant investment from the Government but the fantastic work that has been undertaken on the ground by CAMHS staff. We recognise that there is variation in the system, and we are committed to working with health boards to support them to ensure that there is equity of access across all of Scotland.

Rona Mackay (Strathkelvin and Bearsden) (SNP): For many young people, the most appropriate forms of support are provided in community settings. Will the minister say more about the Scottish Government's work to support community mental health services?

Tom Arthur: Rona Mackay makes an important point. Community-based services are often the most appropriate and impactful way to help people who require support with their mental health, and they are often the most effective and impactful way of supporting people who are seeking neurodevelopmental support.

As I touched on previously, the Scottish Government has provided in the region of £160 million of funding over the past five years to support community mental health services for children and young people and for adults. Young people who are aged 16 or over are also able to access adult services.

The Deputy Presiding Officer: That concludes the statement on youth mental health support. Before we move to the next item of business, there will be a brief pause to allow members on the front benches to change over.

Right to Addiction Recovery (Scotland) Bill: Stage 1

The Deputy Presiding Officer (Liam McArthur): The next item of business is a debate on motion S6M-19128, in the name of Douglas Ross, on the Right to Addiction Recovery (Scotland) Bill at stage 1. I invite members who wish to participate in the debate to press their request-to-speak buttons as soon as possible, and I call Douglas Ross, the member in charge of the bill, to speak to and move the motion.

14:55

Douglas Ross (Highlands and Islands) (Con): I have thought a lot about how to open this debate. I have moved through different positions on what I want to emphasise at the very beginning—there is so much that I want to get through. This debate is so important to so many: to the people who invested time and energy in the Right to Addiction Recovery (Scotland) Bill, and to those who may not know all the detail of how we got here but who simply hope that the bill can help to address the appalling number of drug and alcohol-related deaths in Scotland.

That is where I will begin—with that shocking loss of life. Last year, there were 1,017 drug deaths and 1,185 alcohol-related deaths. Our fellow Scots' lives were cruelly cut short and families were heartbroken, carrying the pain of loss that will never go away. That is happening to far too many people far too often. Over the course of one day—today, when we are in this chamber, debating this bill—six more of our fellow Scots will die from drug or alcohol addiction. For them, the bill will be too late. However, we can give hope to so many others.

This afternoon, I was outside, meeting supporters of the bill. I spoke to one mother who wanted to thank everyone who is getting behind the bill because, tragically, she lost her son two and a half years ago. However, her daughter, who faced similar addiction problems, got the support that she needs and now works in drug recovery. That mother, who is going through the pain of the loss of a son, feels pride in a daughter who has turned her life around. I also heard from John, who told us that, six or seven years ago, he went to sleep every night wishing that he would not wake up in the morning—but he did. He kept going, he got support and he was out there today, banging the drum for members of the Scottish Parliament to back the bill.

We have a simple choice: to agree or not the general principles of the bill. That is not to say that it is the finished article or that it is perfect in every way—it is just about whether we agree that there

should be a guarantee for everyone to receive the treatment that they need, when they need it, to tackle their addiction.

Alex Cole-Hamilton (Edinburgh Western) (LD): Does Douglas Ross recognise that treatment for drug addiction and chaotic lifestyle factors is often about more than only rehabilitation? It is about harm reduction and stabilisation. Comprehensive, trauma-informed recovery work needs to go alongside that.

The Deputy Presiding Officer: Mr Ross, I can give you the time back for that intervention.

Douglas Ross: Thank you. I agree with Alex Cole-Hamilton's point, and I am grateful to him for the way in which he has approached the bill. I know that he needs to be convinced on some aspects of it, but he is willing to get behind it to allow further debate and support.

I go back to the point that we are voting on the general principles today. We are not voting on implementation issues that may be a cause for concern; it is only about whether we want to support the general principles.

I also want to thank the people who have helped the bill to get to this stage. Annemarie Ward and Stevie Wishart are the architects of the bill. They were living and breathing it long before I picked up the parliamentary reins to take it through Holyrood. They are the most knowledgeable and articulate advocates for the bill and for getting people the help and support that they need when they need it. If the bill passes stage 1 today, it will be because of the work of Stevie and Annemarie, and I will forever be grateful to them for what they have done.

I also thank all the party leaders and ministers. I have spoken to the Minister for Drugs and Alcohol Policy and Sport, the Cabinet Secretary for Health and Social Care, and representatives of every party. I spoke to them at the beginning of the process, and I had to speak to more of them at the end of the process, because there are now more parties represented in the Parliament. I am grateful to everyone who has engaged during the process.

I am grateful to the committees that considered my bill—the Finance and Public Administration Committee, the Delegated Powers and Law Reform Committee and the Health, Social Care and Sport Committee. I thank everyone who engaged with those committees and with my consultation on the bill. I thank Elliot Roy, who supported me through the early stages of the bill, and Jamie Carter. I thank Aris Wilson, in my office, who did a lot of the work to get people round the table so that I could speak to them. I also thank the press for its backing for the campaign, including *The Times*, in today's edition of which I

explained why MSPs should rally behind the bill, and the *Sunday Post*, which, at the weekend, gave us a clear picture of what is at stake.

My final thanks in my opening remarks go to members of the non-Government bills unit, who are sitting at the back of the chamber: Neil Stewart, Roz Thomson and Alison Fraser. I have said this in relation to other non-Government bills. I am on my final lap in this Parliament, as I will be leaving it in a few months' time, but I will tell anyone who has the honour of being elected here that that group is one that they should focus on, embrace and support, because those individuals can take an idea, put it into words in draft legislation, help with scrutiny, do all the hard work and the heavy lifting and, in some cases, allow us to put our hopes and aspirations into law. I am very grateful to the three of them. *[Applause.]*

The details of the bill are known, and I will not reiterate them, but I want to talk about the Health, Social Care and Sport Committee's scrutiny. I was disappointed that a majority of the committee felt unable to support the general principles of the bill, but I know from my experience on the Education, Children and Young People Committee that some Scottish National Party members voted against the general principles of a bill that that committee considered but were then able to abstain in the stage 1 vote in Parliament. I hope that Government members will consider that today.

The committee was right to recognise in its report

"the strength of evidence it has seen and heard throughout its Stage1 scrutiny of this Bill of a high level of dissatisfaction with current availability of and access to support services for those experiencing harm from drug or alcohol misuse."

That is it. The committee has heard that evidence. The Government knows that what the committee said is true, because it has told us so publicly and in meetings. That is why we need to pass the bill.

I reiterate that the bill was developed and drafted by people with lived experience. They know what the problems are and they know what the solutions are, and my bill is one of them.

I had intended to go through a number of issues with the committee's report, but I have already taken up quite a lot of time. I was open with the committee—I said to the convener and the members of the committee, to whom I am grateful for the work that they did, "We can work together to amend elements of the bill." That is what our parliamentary process is about. We should look at areas of concern. I hold my hands up: the bill is not perfect. There are areas that I had not even thought about until I was questioned about them as part of the committee's scrutiny, in relation to which it became clear that the bill could and

should be improved. We have the opportunity to do that.

A number of points would have to be addressed—although, in some cases, that would involve quite significant amendments, in others, it would require only limited amendments—in order to get the bill through. We must look at those areas.

I hope that I have shown throughout the bill process—I sat through every committee session on the bill, and I have tried to engage with members across Parliament—that I am willing to work with and listen to people inside and outside the Parliament to make the bill better and to get it right. Some stakeholders have reservations about the bill and some whole-heartedly support it, but they would all like to work together to improve it if we can get it through stage 1 today. However, we must get past stage 1 to do that.

As MSPs consider their votes this afternoon, I ask them to think about the optics of shutting down the debate on a bill that seeks to tackle our national shame of drug and alcohol deaths. Exactly one week ago today, the Parliament agreed to the general principles of the Dog Theft (Scotland) Bill at stage 1. Surely we do not want to find ourselves in a situation in which the Parliament is more interested in debating pets being stolen than in people dying, but that will be the outcome if members vote down my bill tonight. I make a plea to members across the chamber: support the bill and give us time to improve it, so that we can have a bill that we, in Parliament, and people across Scotland can rally behind.

I am exceptionally proud and genuinely honoured to move the motion in my name.

I move,

That the Parliament agrees to the general principles of the Right to Addiction Recovery (Scotland) Bill.

15:04

The Minister for Drug and Alcohol Policy and Sport (Maree Todd): First, I make it clear that the belief in a right to recovery is something that unites us all, wherever we sit in this Parliament. No one in Scotland should be denied the chance to access the support and treatment that they need to heal, recover and thrive. That will not be disputed by anyone in the chamber.

The subject is highly emotive. For me, it is not just an abstract policy debate. I grew up with the impact of alcohol addiction in my family, and I know deeply and personally how it touches lives and how it can shape a childhood, a family and a future. I am incredibly proud of my mum and my dad for how they became sober. Even in the same household, each of my parents had different

recovery journeys. That illustrates to me that there is no one right road to recovery. My family's experience stays with me every single day that I am in my role, and, as minister, I will always be open to finding new ways to improve the support that is available to people and families who are living with problematic substance use.

It is precisely because of that personal understanding that I and my ministerial colleagues have approached the proposed legislation with great care and attention. Since the introduction of the bill, the Scottish Government has been listening carefully to the range of views and evidence that have shaped the findings in its stage 1 report—both that which I have heard in my many visits and meetings since taking up the post and that which has been provided to the Health, Social Care and Sport Committee. I thank everyone who provided evidence and shared their experiences. I also thank the committee for its thorough and thoughtful consideration of the bill.

The Scottish Government shares the central ambition of the bill. We agree that the level of drug and alcohol deaths is, tragically, much too high in Scotland, and we remain committed to tackling it and improving access to services. Since the national mission was announced, in January 2021, we have seen significant investment and progress in the treatment and care of people who are affected by drugs, and much of that progress has also supported people with alcohol problems.

More people can access residential rehab through our funding of eight new facilities, and we are on track to reach our target of 1,000 publicly funded placements per year by 2026. We are driving consistency of care for people through the continued implementation of medication-assisted treatment standards, and we are reducing the risk of opioid overdose through the continued distribution of thousands of naloxone kits across the country, with all front-line police now supplied with kits.

We opened the United Kingdom's first official safer drug consumption facility in Glasgow. We developed rapid action drug alerts and response—RADAR—which is an early-warning system that is designed to alert us to new and emerging threats across the country. We put people with lived and living experience right at the heart of our charter of human rights for people who are affected by substance use, driven by the national collaborative. We are also making good progress with the development of national drug-checking facilities, and I can confirm that the Glasgow facility has now received its licence from the Home Office.

However, although we share the bill's ambitions to improve access to treatment, we all also have a responsibility to ensure that any legislative

proposals are workable, deliverable and aligned with the evidence that is available, and it is clear—

Brian Whittle (South Scotland) (Con): Will the minister take an intervention?

Maree Todd: Yes.

Brian Whittle: I am grateful to the minister for giving way, but I am slightly confused, because you have spent the first part of your speech backing the principles of the bill. Why are you then going on to say that you will not back it?

The Deputy Presiding Officer: Please speak through the chair.

Brian Whittle: Surely the principles of the bill are about the right to recovery, which you have alluded to.

The Deputy Presiding Officer: Always speak through the chair.

Maree Todd: It is clear, from the evidence that was presented throughout the scrutiny process, that the bill raises profound legal, practical and resource concerns that risk undermining service delivery rather than enhancing it. The committee's report outlines fundamental flaws in the legislation, from affordability and deliverability to the tension between the bill's principles—

Sue Webber (Lothian) (Con): Will the minister take an intervention?

Maree Todd: If the member will let me continue, I will set out our concerns about the legislation.

The committee's report outlines fundamental flaws in the legislation, from affordability and deliverability to the tension between the bill's principles and the evidence-based public health harm reduction approach, which we now know saves lives. The report also highlights the risks of overmedicalising care and deprioritising trauma-informed holistic support.

Douglas Ross: The committee heard from a number of people who were opposed to the bill. I made the point to the committee that 80 per cent of those who responded to the call for views were supportive of the bill but that that was not reflected at the committee stage. Everything that the minister is articulating can and should be addressed at future stages of the process. Therefore, surely the best approach would be for the Government to allow the bill to go ahead. It does not have to vote for the bill, although I would love it to do that. The Government could abstain tonight to allow us to make changes, sort out the issues and keep discussing this most important issue for Scotland.

The Deputy Presiding Officer: I can give you the time back, minister, for taking interventions.

Maree Todd: I absolutely acknowledge the willingness of the member in charge to amend the bill, but the committee concluded that the bill would need fundamental revision, and many stakeholders, including clinicians, legal experts and service providers, have raised concerns about its feasibility even with a significant number of amendments.

I also recognise a key argument that has been advanced by the member in charge, which is the need to give the bill a fair hearing and to enable it to progress to stage 2.

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

Maree Todd: In a moment.

However, the committee was clear in its final report, which drew on evidence from expert witnesses, including people working in clinical fields, that progressing the bill in its current form could lead to unintended consequences that would threaten to outweigh its intended benefits. Given those concerns, I recently met with the member in charge and suggested that we consider non-legislative options, but he was unwilling to have that discussion ahead of today's debate. I place on record my offer to Douglas Ross and to any member: I am open to working together on the issues raised by the bill.

Douglas Ross: On that point, if the minister is open and willing, she should allow the bill to progress to stage 2, so that we can sort it out. That would be being open and willing.

Maree Todd: I have already said that there are fundamental issues and that experts who have scrutinised the bill and who have given evidence on it have raised the potential for the bill to cause more harm than good. *[Interruption.]*

The Deputy Presiding Officer: Minister, please resume your seat.

The minister has taken a number of interventions and has responded to those. I do not expect to hear a barrage of comments coming from a sedentary position.

Minister, I can give you the time back for those interventions.

Maree Todd: As I said, I am confident that everyone in this chamber shares the ambition to tackle drug and alcohol deaths in this country, and I am more than willing to work with members and with Opposition parties on the issues.

Our new drug and alcohol strategic plan will embed the human rights-based approach that is outlined in the charter of rights published in December 2024. However, in contrast to what is proposed in the bill, it will do so in a way that is deliverable, adaptable and already aligned with

existing policies and approaches, and that, crucially, has broad support from partners.

Over the summer, we engaged widely with service commissioners, delivery partners and representative groups and with people with lived and living experience. We have developed a suite of non-legislative measures that go further than the bill in improving access and quality. We will further improve treatment standards through a national service specification, to set expectations for rights-based services and for the expansion of MAT standards to cover all drugs and alcohol. We are continuing our commitment to residential rehabilitation and we are focusing on improving pathways for individuals. We will soon publish new standards for young people who are accessing treatment or support, and we will embed the whole-system approach by including mental health substance use protocols and renewed prevention efforts.

We are working across justice and homelessness services, and we recognise that tackling stigma is essential to enabling people to seek help without fear or shame. We are developing a new fund for grass-roots and community projects, building on the success of the Corra Foundation drugs mission fund, which supported more than 300 projects, and we will strengthen local accountability through a partnership delivery framework with the Convention of Scottish Local Authorities and continued annual reporting and monitoring.

Taken together, those actions reflect a rights-based, person-centred approach to recovery that is already being embedded in funding criteria and service design.

I will finish by saying that recovery is not only about clinical treatment; it is about housing, employment and healthcare. It is about strengthening families and communities and, above all, it is about restoring hope and connection to those who have lost both. Any legislative change must be part of a wider holistic and properly resourced response. Treatment is not just about diagnosis. Recovery is not just about abstinence, and it is not linear. It is not just about whether a person is using substances. It is about restoring hope and dignity and building relationships, and it is about empowering people to control their own destinies.

The Deputy Presiding Officer: You need to conclude, minister.

Maree Todd: I confirm that the Scottish Government's intention is to vote against the motion.

The Deputy Presiding Officer: I call Clare Haughey to speak on behalf of the Health, Social Care and Sport Committee.

15:15

Clare Haughey (Rutherglen) (SNP): As convener of the Health, Social Care and Sport Committee, I welcome the opportunity to speak in this stage 1 debate on the Right to Addiction Recovery (Scotland) Bill. As the Parliament will be aware, the committee published its stage 1 report on the bill on 23 September. The report is the culmination of an extensive and far-reaching programme of scrutiny, and I draw members' attention to the evidence and the recommendations that it sets out.

Before I speak to the substance of the report, I thank those individuals, organisations and wider stakeholders who engaged with the committee during its scrutiny and, in particular, those who had the courage to share their lived experience of accessing support services for harm from drug and alcohol use. The committee's informal engagement and call for evidence, the latter of which received 129 responses, were critical in providing an evidence base for the report and they gave committee members a tremendous insight into not just the potential impact of the provisions in the bill, but the wider issues that are involved in tackling alcohol and drug harms across Scotland.

The extent of the committee's consultation and its lengthy programme of oral evidence reflect how seriously it took its role in scrutinising the bill. As is highlighted in the concluding recommendations on the general principles of the bill, the report acknowledges the overwhelming amount of evidence that we heard of a high level of dissatisfaction with the current availability of, and access to, drug and alcohol support services across the country. I assure the Parliament and all those who engaged with the committee that our members are acutely aware that more needs to be done in that area.

Scotland has long-standing and serious issues associated with drug and alcohol harms. Although I commend the good work that is being done at every level to tackle those issues, it remains the case that every single drug death is a tragedy. It is our duty as representatives to ensure that we explore all avenues that we can to improve the current public health situation in Scotland and, ultimately, save lives.

That said, it is also incumbent on the lead committee in any scrutiny process to be forensic in its analysis of the provisions in the bill that is before it. I believe that I speak for all members of the committee when I say that I commend any policy that is intended to improve public health outcomes for the people of Scotland, but it would be remiss of any committee not to consider whether, in practice, the bill that it is scrutinising is capable of delivering its intended aims. Having considered all the evidence, and noting the

member in charge of the bill's recognition of the need for the bill to be substantially amended were it to progress to stage 2, a majority of the committee members concluded that they are unable to recommend that the general principles of the bill be agreed to. That decision was not taken lightly, but it reflects the many concerns that the committee heard about the bill's focus and scope during its stage 1 scrutiny.

The report identifies various provisions in the bill that the committee concluded would require significant amendment in order to be workable. I will highlight to the Parliament some of the key practical challenges that are associated with implementation of the bill as drafted. They include the requirement for individuals to have received a diagnosis of addiction to be able to exercise the right to recovery that would be established by the bill, the requirement for individuals to attend in-person appointments, and the proposed maximum timescales for accessing treatment.

Many contributors to our scrutiny of the bill raised concerns about the bill's lack of recognition of the role of the wider multidisciplinary team and the importance of trauma-informed approaches and a whole-family approach, as well as some of the language and terminology used in the bill. The evidence that was submitted to the committee—

Douglas Ross: I am grateful to the committee convener for taking an intervention. I ask this in a genuinely non-partisan way. She is speaking about the evidence that the committee received. Does she accept that, on balance, the witnesses that the committee heard from were largely against the bill, whereas the public support was 80 per cent in favour of the bill?

Clare Haughey: I remind Mr Ross that the committee looks at the evidence that it receives in its entirety—that includes written evidence as well as oral evidence—and that the witnesses who came to the committee were agreed on a cross-party basis by the committee.

That is how the committee chooses the people and organisations that come before it to give evidence. Although I accept what Mr Ross said, there was some support for the bill from the organisations that we heard from, but they also criticised elements of it.

Evidence that was submitted raised particular concerns that certain aspects of the bill's provisions would exacerbate stigma for those who are experiencing harm from drug and alcohol use and would risk creating additional barriers to their accessing treatment. The committee also heard concerns about how the bill might interact with existing legal frameworks and strategies that are aimed at tackling drug and alcohol harms. More fundamentally, many of those who gave evidence

raised concerns that, in a context of finite resources, establishing a legal right to treatment could create a significant risk of litigation and might set an unhelpful legal precedent for the creation of similar rights to the treatment of other conditions.

There was a general consensus among witnesses, particularly those working on the ground in front-line services, that the bill places too much emphasis on abstinence-based treatment over harm reduction. We also heard evidence that abstinence-based treatment pathways will not suit everyone and that, depending on where they are in their treatment and recovery journey, many individuals benefit more from harm-reduction interventions.

Sue Webber (Lothian) (Con): I thank Clare Haughey for taking an intervention. Would she not concede that, right now, the Scottish Government's focus is on harm reduction and that there is not enough focus on providing the rehabilitation and recovery that the bill would allow us to provide?

Clare Haughey: I remind Ms Webber that I am speaking on behalf of the committee—not on behalf of my party and not on behalf of the Scottish Government. However, in her opening speech, the minister set out some of the work that the Government is doing, which includes increasing the number of rehabilitation beds and services.

The committee heard about the significant strain that those working in drug and alcohol services are currently under, and related concerns about the knock-on impact that staffing requirements associated with the bill might have on the workforce, including on recruitment to multidisciplinary roles.

My committee fully recognises the need for concerted action to address the public health crisis that the country continues to face in relation to drug and alcohol harms. However, after careful and considered scrutiny, a majority of members have been unable to recommend that the general principles of the bill be agreed to.

This is a serious topic that requires careful and considered policy approaches to save lives. It is incumbent on those in the chamber to ensure that any legislation that it considers in the area makes a real difference and does not inadvertently create additional barriers to treatment and recovery for service users or place additional unnecessary strain on service providers.

However the chamber decides to vote today, I welcome the robust debate that Douglas Ross's bill has prompted, and I look forward to continuing to work collaboratively and constructively with colleagues to help tackle the on-going public

health crisis that has plagued our communities for far too long.

The Deputy Presiding Officer (Annabelle Ewing): The next speaker is Annie Wells, who joins us remotely to open on behalf of the Scottish Conservatives.

15:23

Annie Wells (Glasgow) (Con): Once again, I send my apologies for not being in the chamber in person today. Nine years ago, in my maiden speech, I spoke about Scotland's drug crisis—about the lives lost, the families broken and the communities left behind. When I addressed the chamber back in 2016, the number of drug deaths annually was 868, but in 2024 the number was 1,017. Nine years on, I stand here again, heartbroken that the situation has drastically worsened.

For me, this is not just policy; it is personal. I lost a friend to drugs when I was very young. I remember standing at her funeral on Christmas Eve, when my son was still little, and thinking, "How can this be happening? How can someone so full of life and so loved be gone so soon?". Over the years, I have lost family members, too. My neighbours have also lost loved ones, and unfortunately, many people in Glasgow can relate to that experience.

When I speak to people in the community, they ask me the same question over and over again: why do we not do something to get them into recovery? Instead, what we see is a Government that is content to manage addiction rather than help them live again.

Right now, it feels as though we are putting a plaster over a wound that needs surgery. We are treating people as lost causes instead of fighting for their futures.

In Calton, where I went to school, people feel forgotten. Residents who have spoken to me have cited that the Thistle centre's presence has brought more drug dealers into the area. One man, an addict, who spoke to the media, said that he desperately wants to be in recovery but putting the Thistle centre there has made things worse for him. He said:

"There's no hope. I have tried to get treatment and I just get sent away, put on methadone or on to an extra script."

He, like many others, is asking:

"Why am I being left behind?"

That question should haunt members.

A few months ago, I put in a freedom of information request to the Thistle, and the answer that I got was devastating. Not one single person has been put into recovery from the Thistle—not

one. Last week in committee, I hoped that things might have changed, but again I was told that not a single person has been put on to a recovery pathway. I was then told that that is not one of the measures of the Thistle's success. How can we accept that? How can a so-called safer consumption space be called a success and how can we consider rolling it out to other cities if it does not get anyone into recovery?

I was told that not everyone's recovery journey is the same, and I absolutely agree with that, but more than 460 people have used the Thistle, and if everyone's journey is not the same, why is nobody's journey leading to recovery?

When the Parliament voted to support the Thistle, it was under the impression that it would help more people into recovery—I voted for that. That was a promise, but the people of Calton and the people of the rest of Scotland feel as if it was just for show.

A grandma whose family has lived in Calton for more than 150 years says that she does not let her grandkids play outside anymore, and residents feel as though heroin has been decriminalised in Calton. It breaks my heart to hear that, because that community has already faced a lot of hardship, and it deserves better than to be treated as a testing ground.

I see the same pattern where I live in Springburn—the same thing that I spoke about nine years ago. I see the faces of the same people walking down the road to get the same national health service-prescribed methadone that they have been on for 30 years. That is 30 years of the same cycle and 30 years without real support to get better. That is why this bill matters so deeply. It says to those people, to the ones who believe that they have been written off, that we have not forgotten them. It says that recovery is not a privilege but a right, and it says that every person deserves the chance to get well and not to be parked on methadone for decades or ushered into a facility.

This is what I want Scotland to be. I want to see a Scotland where we invest in residential rehab, community-based recovery, aftercare, jobs and purpose. That is what changes lives.

I think back to my friend's funeral all those years ago, and I wonder, if she had been offered real recovery, would she still be here today? That is a question that drives me. It is a question that should drive every single one of us in the chamber. Behind every statistic is a name, a face and a family. If we truly believe in compassion, in dignity and in second chances, we need to act like it.

I urge the minister yet again to look at this issue in a different light and to think about what we can

do at stage 2. How can we get this bill to the point that we can have a further discussion?

People do not just deserve to survive; they deserve to live. In yesterday's debate, the cabinet secretary Màiri McAllan said on the subject of illegal migration:

"we are talking about people ... with hopes, people with aspirations, people who have suffered and human beings who should be treated with dignity and respect."—[*Official Report*, 8 October 2025; c 26.]

I agree with her, but I must ask the Scottish National Party Government why it cannot extend the same compassion, respect and human dignity to those suffering from addiction. If we are honest, this consumption facility is not a pathway to hope; it is a deferral of tragedy.

It is a waiting room for inevitability, where human beings are allowed to remain trapped in addiction for years without any real chance of recovery. Scotland does not need more managed misery; it needs meaningful recovery. It needs a Government that is brave enough to say that people deserve more than survival—they deserve to live.

I urge everyone in the chamber to listen to the message from Faces and Voices of Recovery UK:

"You keep talking, we keep dying."

Let us do the right thing by taking action now and backing this bill.

15:30

Jackie Baillie (Dumbarton) (Lab): At the heart of this bill is a simple principle: if someone who is battling an alcohol or drug addiction asks for help, they should get it, and that help should not be tokenistic but transformative. It should be a pathway towards a life free from toxic substances that includes a right to residential rehab, if needed. As the First Minister said earlier, there is already a charter that reflects that, but the fact that we are now debating this bill underlines its total inadequacy.

Here is what we know. Six years on from the SNP declaring a drugs death emergency, too many people are still dying. Although there was a small drop last year, which of course is to be welcomed, the provisional figures for the first six months of this year suggest that numbers will increase. We still have the worst drug deaths figures in the whole of Europe, and there are simply not enough rehab beds. The medication-assisted treatment standards are still not being met, including the provision of mental healthcare and trauma-informed care.

Let me turn to rehabilitation beds. The SNP's definition of a rehab bed is quite wide ranging. The

SNP talks of placement, although some of those beds might be a crisis bed for one night. One cannot help but be cynical about whether that redefinition is about meeting its target rather than creating real provision. Colleagues will recall that, in 2021, the SNP pledged to increase the number of rehab beds to 650 by March 2026, which is an extra 225 beds. The First Minister has now told us the latest figures but, meanwhile, recovery services such as River Garden Auchincruive in Ayrshire and CrossReach in Dundee have faced funding crises.

We know that beds across Scotland are lying empty due to a lack of referrals because there is no money, so let us do the maths. We know that 28,000 Scots receive long-term opioid substitution therapy, but there are only around 500 residential rehabilitation beds. Around 140 of those are publicly provided, and the rest are in the charity and private sector. In 2022-23, the last year for which there are figures, fewer than a thousand people started a publicly funded residential rehab placement.

The charity Faces and Voices of Recovery estimates that, for Scotland to match European rates of rehab, there would need to be 2,700 placements a year, but we are nowhere near that. Figures last week showed that the Thistle centre has been used 7,165 times since January, but only 50 people have been referred to some kind of care and not a single one of those was sent to rehab. In the most recent survey of alcohol and drug partnerships, every single one of them reported barriers to residential rehab, most of it funding related.

Then there are the stories of people such as Stephanie Ritchie, who faced the amputation of her leg due to drug use yet was initially refused rehab. As the recovery charity who helped her said at the time:

"You could be at the end of your life and about to lose a limb like Stephanie and we would still have to fight to get you a place in rehab."

Stephanie, who first became addicted aged 11 in a children's home, asked for help. She should have received it.

The SNP, and the Greens, who I believe are voting with the SNP this evening, should be ashamed that they are standing in the way of that principle becoming law.

I would be the first to agree that the bill is not the finished article, with all due respect to Douglas Ross. There is a need to amend it at stage 2 to improve it and make it more robust and more deliverable. It also needs to consider the role of families, scope out the costs and be a bit more pragmatic about the three-week timescale. All that

is doable, so it is beyond strange that the SNP is unwilling to do that.

The Parliament spends an inordinate amount of time amending Government legislation. Do I need to remind ministers of the 400 amendments to the recent Housing (Scotland) Bill, or the dog's breakfast that was the National Care Service (Scotland) Bill, which had to be completely rewritten? This is not a game: it is about rehabilitation for alcohol and drug addicts who might otherwise die. The bill is about empowering vulnerable people who are in the grip of a condition that is so overwhelming that they are unable to advocate for themselves. The concern about resources is understandable, but it is a distraction. If the Scottish Government was delivering on its pledges to invest in rehabilitation, a large proportion of the money should be accounted for anyway. In public policy terms, we should not be forced to choose between harm reduction and recovery: both are essential if we are to solve this crisis.

With deadly synthetic opioids sweeping our streets, we do not have time for half measures. We are told that recovery is available to all, but it is not. There is a postcode lottery and, in some cases, it is determined by people's ability to pay. The bill would end the postcode lottery because, if we can pass legislation to give rights in housing, education, mental health and beyond, we can make recovery a right, too. Scotland does not lack compassion; the Scottish Government lacks courage. Courage is what the bill asks of us.

15:36

Patrick Harvie (Glasgow) (Green): I begin by acknowledging the work that Douglas Ross has put into lodging the bill in the Parliament. Any member's bill, whether it is consensual or controversial and whatever the topic, takes a significant amount of work, which we should acknowledge. I also acknowledge the work of the Health, Social Care and Sport Committee. I joined the committee part-way through the scrutiny process, so I acknowledge the work that was done before I joined it. I took the time to watch and read the evidence that I had not been present for and I express my thanks to all the witnesses who contributed to and enriched the scrutiny process.

We should also all recognise the shared commitment to the issue. Respectfully, I disagree with Douglas Ross's point about optics. Whether we pass a bill on one subject and do not pass a bill on another does not tell us how much we care or do not care about a topic. The Parliament has a responsibility to pass what we believe is good legislation. I do not think that it is about sending signals.

Douglas Ross: If the member does not agree with my point about the optics of passing stage 1 of a dog theft bill versus a bill that is trying to save people's lives, does he agree with my point about shutting down further debate on an issue? That is what the Greens and the SNP will be doing at decision time. They could vote against the bill at stage 3; they should at least give the bill time to be improved. If the bill cannot be improved to the satisfaction of Patrick Harvie and the Greens, they should vote it down at stage 3, not shut down the opportunity to keep on talking about the issue and improving the bill.

Patrick Harvie: I will come to the detailed reasons as to why I will not take that path and why I do not think that it would be the right decision.

In opening, I also want to express the hope and the confidence that Jackie Baillie was not intending to imply that anyone treats the topic as a game. We all take it with extreme seriousness, and recognise that Scotland has a wildly unacceptable number of drug deaths and that there is a significant degree of frustration about the pace of change. Even though there is broad support for the direction of travel of the Government's policy of investing in services and innovating, there is frustration about the pace at which that is happening. We know that those things take time.

With a small number of passionate exceptions, most of the evidence that was heard at stage 1 was broadly critical of the bill. A long list of concerns has been raised. Absolutely nobody has been in denial of the problem, but many have argued that the bill is the wrong answer to it. A number of changes would need to be made to the bill if it were to progress: it would need to be made consistent with the current policy and legal framework, rather than being in conflict with it. The current framework is regarded as being more collaborative and less medicalised. The bill would need to address the concern that the legal right to treatment in some areas would result in the deprioritisation of investment in prevention and early intervention.

There is a concern that the bill will create a precedent for the creation of legal rights to treatment in specific health areas. I do not think that it takes much imagination to think where we could get to in a relatively short space of time if the allocation of resources in healthcare were determined not by clinical need but by whether individual bills had passed through Parliament.

It was suggested that the bill needs to give more clarity on how the support that is given by carers, family members and others could be brought into the process. It is unclear how or whether that could be addressed at stage 2. It has been argued that the bill does not embed a trauma-informed

approach and that, although that needs to be addressed, there is a lack of clarity about what changes could possibly achieve that.

The bill's requirement for a medical practitioner to make the treatment determination risks overmedicalising the process, and it fails to recognise that other routes to accessing services are often hugely important. There is a concern that the costs, including for staff training, would go far beyond those estimated in the financial memorandum, and that that, in itself, would have a detrimental impact on the provision of services.

There is also a concern that, by creating a legal right to treatment within a fixed timeframe, when capacity in services takes time to expand and be developed—

Russell Findlay (West Scotland) (Con): Will the member take an intervention?

Rachael Hamilton (Ettrick, Roxburgh and Berwickshire) (Con): Will the member take an intervention?

Patrick Harvie: —the bill creates significant risk of litigation, and that that would generate additional financial costs to service providers at the expense of investment in services.

Brian Whittle: Will the member take an intervention?

Patrick Harvie: I will give way if there is time in hand, Presiding Officer.

The Deputy Presiding Officer: We have very limited time in hand, but enough. Which member are you taking an intervention from?

Patrick Harvie: I saw Mr Whittle first.

Brian Whittle: Mr Harvie talks about the issues with creating time directives. Does he not recognise that we already have a time directive, which is that people are supposed to receive treatment in the NHS within 12 weeks, and that that directive has been broken? Why can we not have the directive that is in the bill?

Patrick Harvie: The bill seeks to create a legal right to treatment within three weeks of a treatment determination that would be actionable and challengeable, at a time when we all agree that we should expand the provision of services. I worry that money would end up being spent on lawyers' fees instead of providing services.

The requirement for a medical diagnosis has also been mentioned. Many people require support but do not have a clinical diagnosis of addiction, and they would face additional barriers.

I am aware of time, so I will finish by saying that recovery means different things to different people. In the debate today, we have already

heard a member conflating recovery with residential rehab leading to abstinence. That is one route to recovery for some people, but it is not going to be the path that everyone takes or that everyone is ready for.

There is a real risk that the bill would see resources shift away from other services that work well to reduce harm and prevent deaths. Scotland is investing to expand the services that are needed and to innovate with new provision such as the safer consumption facility, which is already saving lives. We also need the reform of the Misuse of Drugs Act 1971, which is wildly out of date and inhibits such innovation, making it harder to provide services.

Continuing that work is the way to make progress in cutting drug deaths, reducing harm and giving people the support that they need on their own terms. That is the direction of travel that Scotland should continue taking, and we should all continue to put pressure on the Government to do that at pace. However, I do not believe that the bill would help us do that.

15:43

Alex Cole-Hamilton (Edinburgh Western) (LD): I congratulate Douglas Ross, not least on the work that he and his staff have done alongside the non-Government bills unit, but also on the work that he has done across the chamber to bring us to a space where the Liberal Democrats will offer our cautious support for the principles of the bill at stage 1. This is the last opportunity before this Parliament rises for the election for us to use our legislative framework to deal with one of the worst crises in our public services and way of life.

I listened with interest to what I thought was a compelling speech from the minister, who very bravely took us through some personal examples of addiction in her family, for which I commend her. However, I fundamentally disagree that rehabilitation and harm reduction are in any way mutually exclusive. I fundamentally believe, as Liberals do, that harm reduction is something that we need to have everywhere. We do not. We have called for the Thistle pilot to be expanded across the country, not least to our metropolitan areas, but also to those areas of rurality where harm reduction is so badly needed.

Rehab has its place, too, however, and people deserve a right to rehab. Therefore we will support the bill, because we cannot turn our backs or close the book on the last opportunity in this session of Parliament to make meaningful change in this area, before a new Government, potentially, is sworn in next spring.

We owe it to every family who has lost a loved one to addiction to explore every possible solution, because this is a crisis and a scandal that can blight every part of life's journey. I have talked many times about my experience in my journey to Parliament through organisations that provided addiction services, not least to babies who were born addicted to substances and have to go through withdrawal in their first days of life. I was proud of the Liberal Democrat influence on the Scottish budget that allowed an increase in the budget for Aberlour Children's Charity for its provision of services for babies experiencing neonatal abstinence syndrome.

The bill's aim is to give everybody the right to timely person-centred treatment. We should all be able to get behind that. I do not understand why people are fixated on the gravity of where the bill is now, as opposed to where we could get it to. That is why we are not going to give up on it today.

Too many people who are seeking help are still turned away, told to wait and sometimes simply lost in the system. The bill creates a legal right for people who are diagnosed with addiction to receive a treatment determination and to begin treatment within three weeks.

I have concerns about bringing in a guarantee to be covered by the funding envelope that we currently provide for drug and alcohol services in this country. I am concerned that such a legal imperative will lead to alcohol and drug partnerships, social care partnerships and health boards diverting resources away from crucial trauma-informed and harm reduction services in order to meet that guarantee. However, that need not be the end of the story. I have had discussions on the issue with Douglas Ross—I am grateful for his time—and I believe that he supports an expansion of that funding envelope so that we can accommodate both types of services, because they should not be mutually exclusive.

I am also concerned that, at current workforce levels, we do not have enough people working in addiction services to make the bill's proposals a reality. That does not mean that we should not try. It does not mean that we should not seek to expand that workforce, because whatever Parliament decides this afternoon, we should expand the number of people who join addiction services and help others to stabilise their lives and get clean of substances.

That statement of intent for the bill is powerful, but, without that capacity, it is, potentially, not realistic. I look forward to working with the member in charge, if Parliament passes the bill at stage 1 today, to get it to a place where we can answer those criticisms and, by so doing, respond to the committee's reflections on the financial

memorandum and the deficiencies that it sees therein, of which we heard from Clare Haughey.

The bill might be far from perfect, and I am not entirely convinced that it provides all the answers to this crisis—in fact, I know that it does not. We need to recognise that, often, substance use is a response to unresolved childhood trauma. In every measure that we deploy—whether it is a right to rehab, stabilisation or harm reduction in the corridors of the Thistle or in centres like it, which I hope will be rolled out across the country—we have to recognise that trauma-informed practices are key to not just helping people to conquer their addictions at that moment in time, but to addressing and resolving the underlying trauma that led them to that space in the first place. We need to wrap around a range of additional services, once people are stabilised, to help them to conquer problems in their lives that are unrelated to substance use but that underpin that use in the first place. That includes providing access to a safe, warm and stable home; ensuring that they have a trajectory and purpose in life, through education, training or employment; and understanding, at every stage, the trauma that underpins the decisions that they have taken up to this point.

I do not believe that the concerns about staffing or capacity are good enough reason to reject the bill. It is up to the Scottish Government to work with parliamentarians to say that, if it is the will of Parliament—and I believe that it should be the will of Parliament—we will make a funding envelope around the bill that accommodates the needs of the services that now exist for harm reduction and stabilisation, but that also offers the crucial right to recovery and rehabilitation that Douglas Ross has rightly put in his bill.

For those reasons, the Liberal Democrats will support the bill's general principles at decision time. Every life lost to addiction is one too many. We cannot afford to let the conversation pass us by and close the book on legislative change for the rest of this parliamentary session. Therefore, we will support the bill at decision time.

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

15:50

Emma Harper (South Scotland) (SNP): I recognise the hard work on which Mr Ross has embarked while introducing his member's bill. Having taken a member's bill through the Parliament in the previous session, I know how much hard work it is for a member and their team, and how much support from the excellent non-Government bills unit is involved.

I also understand and acknowledge the principles that lie behind the bill. The minister already described the wider approach and policy measures on housing, employment and healthcare that are necessary to address recovery from addiction.

Rachael Hamilton: Will Emma Harper give way?

Emma Harper: I would like to make a couple of pages of progress.

Every life that is lost due to alcohol and drugs has a devastating, heartbreaking and tragic effect on families and communities.

For the debate, I will keep my comments focused on the evidence that we took, as I am a member of the Health, Social Care and Sport Committee. I will also focus on the stage 1 report.

Rachael Hamilton: Does Emma Harper not believe that it was a privilege for her to introduce the Dogs (Protection of Livestock) (Amendment) (Scotland) Bill? She was granted the time and the effort to take it to fruition even though there have been only a couple of situations in which somebody was found guilty of livestock worrying under that legislation. Should the SNP not afford Douglas Ross and all the people who are losing their lives the time to progress, and the courtesy of progressing, the bill, considering that it did that for you?

The Deputy Presiding Officer: Always speak through the chair.

Emma Harper: A lot of time and consideration was given to my member's bill, and we took months of evidence on Douglas Ross's bill at the Health, Social Care and Sport Committee.

I will focus on the evidence that we took at the committee. We need to ensure that our policies are effective to help to support some of the most vulnerable people in society. Our committee heard directly from individuals and organisations and conducted an open consultation for anyone to give their views on the bill. The responses were many and varied, so I will pick up just a few.

The Highland alcohol and drugs partnership said:

"The Bill, as it is currently drafted, is unlikely to bring the transformative change that is urgently needed".

The Scottish Association of Social Work submitted:

"We also have reservations about the current requirement to be abstinent before accessing some medical interventions. We believe that this represents a barrier to early help and for some people may be one that they cannot overcome."

Aberlour said:

"we believe the Bill is too narrow in its idea of the treatment that should be available. The focus appears to be on residential rehabilitation that is abstinence based."

I will cover a few points from the stage 1 report, including points made in the executive summary. Committee members have already referred to a number of clear points.

The families and carers of individuals who are experiencing harm from drug or alcohol use expressed disappointment that the bill makes no reference to the crucial role that family and carers play in supporting an individual through their treatment and recovery. However, I note that Mr Ross is prepared to re-examine that if the bill progresses.

Our report calls on Douglas Ross to consider further how trauma-informed practices can be properly reflected in the bill.

We heard evidence regarding the use of language and definitions. I feel it myself, as I have raised the issue of stigmatising language on numerous occasions in debates and questions in the chamber. There should be a minimum requirement for education to be provided to any health professional, as anyone in healthcare could come into contact with a person who is experiencing harm from substance misuse.

Russell Findlay: Will Emma Harper give way?

Emma Harper: I would like to continue, if Mr Findlay does not mind.

Indeed, two members have already used stigmatising language in the debate. I agree with the comment in the report that some of the language in the bill can be considered stigmatising. The requirement to have a diagnosis of

"'addiction' ... risks creating stigma",

which might discourage

"individuals from putting themselves forward for treatment."

An example of repairing the language would be to change the word "addiction" to "substance use disorder", or "addict" to "a person with a problem with problematic drug use". It is really important that we help to support people and take the stigma out of this. That is backed up elsewhere in the "Diagnostic and Statistical Manual of Mental Disorders", which reflects what I am saying about stigmatising language.

As a member who represents a rural region, I will highlight the requirement in the bill for a right to an in-person appointment. That would disadvantage people who are resident in remote and rural areas.

Finlay Carson (Galloway and West Dumfries) (Con): Will the member take an intervention on that point?

Emma Harper: No, I will continue speaking, because I have a couple of pages left of my speech that I would like to finish.

During and since the Covid pandemic, we have seen the advances of Near Me appointments and video consultations—they should be taken into consideration should the bill progress. Video or remote consultations suit people in rural areas for a number of reasons, such as those relating to travel, transport, time and privacy.

The committee also heard concerns about the three-week timescales for individuals to commence treatment that are proposed in the bill, which might cause challenges in the quality and choice of treatment and could, again, lead to restrictions of treatment.

I am conscious of time, Presiding Officer. As can be seen throughout the report and heard from speakers across the chamber, there are many calls for changes to be made, and so many proposed alterations would require additional scrutiny and additional time. Some of the requested changes are not insignificant and would leave the bill significantly different from the original bill that was proposed. For that reason, I cannot support the bill at stage 1.

15:56

Sue Webber (Lothian) (Con): I thank my colleague Douglas Ross, the non-Government bills unit, Annemarie Ward, Stevie Wishart and all the other groups and individuals who have helped to bring the bill before the Parliament today. I give a call-out to Annemarie and Stevie for, during the short period when I was the shadow minister for drugs and alcohol policy, steering me through some of the landscape that I was unfamiliar with.

Under the SNP, drug-related deaths have spiralled out of control; the number of drug deaths in Scotland has more than doubled since it came to power. The current strategies to help those who are struggling with addiction have failed and are still failing. It is not about language; it is about saving lives. Even Nicola Sturgeon has admitted that the SNP took its "eye off the ball" on drug deaths and that, as a Government, it got things wrong.

We can all agree that each and every drug or alcohol death is a tragedy, and there can be no doubt that our drug deaths crisis is an emergency—I will not be able to speak with the emotion that Annie Wells has shown this afternoon. Scotland still, for the seventh year in a row, has the highest drug deaths rate in Europe.

During that time, more than 8,300 people have lost their lives, leaving behind grieving families and friends. The most recent UK-wide data available shows that Scotland's drug death rate is nearly three times that in England and Northern Ireland, and 1.9 times higher than that in Wales. People in the most deprived areas of Scotland are 12 times more likely to die of drug misuse than people in the least deprived areas. That is an utter shame. In 2020 alone, 602 children lost a parent or a parental figure because of a drug death. The number of alcohol-specific deaths, having increased by 16 per cent since 2019, is above 1,000 for the 12th year in a row.

Kirsten Horsburgh, the chief executive officer of the Scottish Drugs Forum, blamed the SNP's cuts for increasing drug deaths. Alcohol and drug partnerships, which tackle drug and alcohol misuse at the local level, say that they are underfunded and have no confidence in the SNP Government's leadership—I agree. Seventy-two per cent of ADPs said that they do not receive enough funding to deliver the national mission of reducing the number of drug deaths. Audit Scotland said that an 8 per cent real-terms reduction in funding over the past two years means that ADPs are having to find ways to do more with fewer resources. Only one in three ADPs agree that the Scottish Government is showing effective leadership on the national mission.

The SNP Government has failed to make a serious dent in the appalling drug death toll. Its solution—its silver bullet—was the Thistle, a drug consumption room in Glasgow. That was used for years as a constitutional excuse for the number of drug deaths being so high in Scotland. A reported 7,000 people have been using the drug consumption room—Jackie Baillie spoke about the statistics in more detail. That room has cost £2.3 million, but not one person has been signposted to a rehabilitation service. We were promised that people would be, which was one of the reasons why the Conservatives supported the pilot. We were misled. To say that I have reservations about the effectiveness of drug consumption rooms would be an understatement, and I, for one, do not want to see them spread across the country in any way, shape or form—certainly not in the capital city of Edinburgh.

Annie Wells: I wonder whether you could explain the situation a wee bit more to me. The people you and I speak to surely just want their family members or loved ones to get the help and support that they need to be better. So, is the Thistle delivering or not?

The Deputy Presiding Officer: Always speak through the chair.

Sue Webber: I do not think that the Thistle is delivering. Indeed, Annemarie Ward from FAVOR has said that the safe consumption rooms—

Alex Cole-Hamilton: Will Sue Webber take an intervention?

Sue Webber: I do not think that I can, Mr Cole-Hamilton, as I have very limited time. I am not sure.

The Deputy Presiding Officer: There is limited time. It is up to the member.

Sue Webber: I want services to be underpinned by prescription programmes, detoxification and rehabilitation services. That is what is laid out in the Right to Addiction Recovery (Scotland) Bill, and that is what needs to be part of the solution.

Another hard truth is that Scotland has a far lower number of residential rehabilitation treatment spaces than the European Union average. Ms Baillie gave us the statistics on that today. The latest data shows that there are still only 513 such beds in Scotland. From experience, I know that, later on, someone in the chamber will say that we have another 150 rehabilitation beds, which we should be celebrating. The Scottish Government says that those beds will treat 1,000 people. However, the reality is that, for those 150 beds to treat 1,000 people, they can be used by each individual only for six weeks; yet, time and again, I remind members that six weeks does not provide rehabilitation—six weeks is needed for detoxification and stabilisation alone. It is not the solution. That is the harsh reality, so members must support the bill today and, if they cannot, they must ask themselves why.

Instead of investing in recovery, the SNP continues to advocate decriminalisation. We heard more of that from Patrick Harvie, too.

The bill has been drawn up alongside people with lived experience and experts in the field of addiction. It would be a game changer if the members in the chamber who do not plan to back it would wake up. We must learn one thing this afternoon: by not voting to support Douglas Ross's bill, the Government is standing in the way of saving lives, and I am absolutely devastated that that is the position that it is choosing to take.

16:02

Michael Marra (North East Scotland) (Lab): I draw members' attention to my entry in the register of members' interests. I was previously employed by Dundee's Leverhulme research centre for forensic science, which is involved in the development of drug-checking services.

I acknowledge the work of Douglas Ross, his colleagues, stakeholders and campaigners, many

of whom have lived experience, who have contributed to the bill and given their views on it, often by reliving trauma and discussing difficult situations in their lives. For many people, such conversations do not come up without cost. I know that everyone who is engaged in the work is motivated by a deep desire to save lives and protect people from the harm that addiction causes for individuals, families and communities. No one who has engaged in this most serious of issues and met people with lived experience would argue against giving people a route out of addiction and a pathway to recovery.

There has to be respect for the individual and recognition that a one-size-fits-all approach simply does not work. Where practical abstinence measures work for people, they should be available, but abstinence is not the only possibility or the only pathway to recovery. As Jackie Baillie said, there should not be a policy choice between harm reduction and residential rehabilitation—that cannot be allowed to be the case. However, I am afraid that parts of the debate are turning on a balance between the two, so, at times, the debate moves from the practical towards the philosophical. The pragmatic solution that is set out in the Labour position is that we will support what works.

My home city of Dundee is in the top three areas in Scotland for drug deaths, and the city and the community bear the scars of that crisis. The number of drug deaths in Dundee in 2024 was nearly double the number in 2010. That is nothing short of scandalous, and it always bears repeating. Those lives were needlessly lost while inadequate services were left to decline, and necessary interventions to save lives were ignored.

There has clearly been service failure in Dundee, as was laid out in the Dundee drugs commission report, and many lives have been lost as a result. That failure was characterised by a system that was overly clinical and medicalised but that was punitive in nature and lacked flexibility for the individual. If services are to have any chance of achieving lasting change, they have to meet people where they are. Far too often, that does not happen. The pace of change that people have experienced with the services in Dundee has been glacial.

I remain deeply sceptical about the assessment of the MAT standards. The green rating that has been attributed to many of the services in Dundee does not reflect the experience of service users—or of service providers—of the availability of those services.

There also remains a significant data issue. If we are to do what works, we need to know what works. We need proper live data. There have been

clear improvements in the RADAR system in relation to warnings about the kinds of drug mixes that are on our streets and that are a risk to people daily. However, we need to shorten the timescales for forensic toxicology, so that we give policy makers the information that we need while simultaneously protecting people from harm as best we can.

We also need drug-checking services as a priority. The minister knows that I want the Dundee facility to be operational as soon as possible. In the past week, I have been in conversation with the University of Dundee to see how that might be progressed at greater pace, and I know that the minister shares that aspiration—she said as much at the joint committee meeting last week.

It is crucial that we get services right at moments of potential change for individuals. The often neglected area of transition and stabilisation services is critical to that. Done properly, those services can help people to get to a place where they can take the necessary steps from chaotic drug use to accessing residential rehabilitation where it is—as it should be—available. That can support them to beat addiction and to get their lives back on track.

At present, in far too many areas, stabilisation and transition services simply do not exist at all. Beyond committing the funds, the Government must work at pace to make sure that those services are available on the ground, because I am led to believe that some funds in the Scottish Government budget remain unspent because there are no options for spending the money.

Each of the measures that I have set out would help people on the path to recovery and would save lives. In the context of the bill, which Douglas Ross has introduced with the support of his colleagues, we must recognise that there is no one path or solution for this most serious of crises. The Government should be doing everything that it can and exploring every avenue to address the issue. It cannot shut down one priority to address another. If this is genuinely a crisis, the Government and service providers should be using every tool at their disposal to save lives as part of that national mission—to use the language of religion that we have heard from the Government.

The explosion in drug deaths in this country is unique in character and was preventable—it should have been prevented. It is the Government's single biggest categorical failure in public health, for which the previous First Minister has admitted culpability. No genuine solutions have been brought to the table. The numbers remain far too high. Every year, my constituents pay with their lives. It is my sincere hope that the

bill will pass stage 1 today and that the debate surrounding it can be a catalyst for much-needed change in my city and in the rest of the country.

16:08

Rona Mackay (Strathkelvin and Bearsden) (SNP): Everyone in the chamber understands the urgency and gravity of the drugs crisis in Scotland. The scourge of addiction has been with us for too long and far too many people have died. Too many people have had their lives blighted by this desperate health issue.

As we have heard from the Health, Social Care and Sport Committee convener and other members, sadly, this bill is not the answer. It is flawed to the point of being beyond repair and could not work. The committee's excellent stage 1 report presents a balanced but realistic view of what the member is proposing, which is well intentioned, of course, but, I believe, unworkable.

It is clear that there is widespread concern about the bill from stakeholders as well as from the committee. Scottish Health Action on Alcohol Problems pointed out that, if the bill were to be progressed,

"it would need to be extended significantly to ensure all people who would benefit from alcohol services and treatment have a right to treatment, not just people who are diagnosed as 'addicted' or dependent."

Who would set the bar for who should receive treatment?

Quality of care is not currently addressed in the bill. Surely that is crucial. In addition, the timescales for starting treatment might be unsuitable for certain patients. Every patient has individual needs that must be tailored to them to give them the best chance of recovery.

A further issue is the limited idea of recovery in the bill. Beyond medical treatment, it does not address the psychosocial and practical life support that is necessary in recovery, nor does it acknowledge the structural drivers of harmful substance use. Instead, it positions the person as the problem and treatment as the solution.

That leads me on to stigmatisation, which my colleague Emma Harper spoke about. Disappointingly, I think that the bill reinforces stigma through its language and by perpetuating the idea that alcohol and drug use is the individual's fault. That is not acceptable when addressing a public health issue.

The Royal College of Physicians believes that mandating a clinical pathway would create challenges and that it usually results, paradoxically, in poorer condition management, as assessment and review stages are created to support only mandated pathways. For instance,

staff might be moved from one health setting to another to provide mandated treatments, but they might lack the skills that are required if they have not had specialist training.

The Scottish Government's national mission on drugs has already been carefully designed by people with lived and living experience. The bill's blanket, one-size-fits-all approach for people who are recovering from addiction does not work, as there is no one perfect route. Everyone's recovery is different, as other members have said.

It is entirely unclear whether Douglas Ross's estimated costs for providing the proposed treatment are accurate and realistic. Crucially, it is also unclear how the right, as it stands in the bill, would be enforceable.

The Scottish Government's forthcoming national service specification represents an opportunity to set out what services should be available. There is a risk that the bill could detract from that work by taking funding away from current essential services.

I am pleased that the minister has confirmed that £2 million will be provided for an additional placement fund for alcohol and drug partnerships. That funding relates to residential rehab in Scotland, which is much needed. Its provision is one of a range of actions that the Government has taken through its £250 million national mission on drugs.

The opening of a safer drug consumption facility in Glasgow was groundbreaking, and it is already estimated that the facility has saved hundreds of lives. Credit must go to the late and greatly respected Peter Krykant for all his work and determination in making that a reality. Of course, the widening of access to life-saving naloxone is also crucially important. I would advocate for a wider public awareness campaign on naloxone, due to its proven effectiveness.

I really regret having to vote against the bill. I agree with its overall ambition of supporting people's recovery from alcohol and drug addiction but, sadly, the mechanisms that it proposes simply do not work. The Scottish Government is working hard within its powers to reduce drug deaths, but I must make it clear that our public health approach is at odds with the Westminster legislation that we must operate within, and I wish that that was not the case.

Russell Findlay: Will the member take an intervention?

Rona Mackay: No.

I hope that, through the work that is in progress, and with a clear vision of how to prevent future generations from succumbing to the dangers of drugs and alcohol, we can prevent or, at least,

reduce the shocking number of deaths. It sounds trite to say that every life lost to addiction is a tragedy, but be assured that the Scottish Government is absolutely committed to implementing evidence-based approaches that will save lives.

The Deputy Presiding Officer: I call Graham Simpson, who has up to six minutes.

16:13

Graham Simpson (Central Scotland) (Reform): Many thanks indeed. I will not take six minutes, because I normally get two minutes these days, but I will take interventions—including from Mr Findlay, if he wishes to make one, because I was not able to take one from him yesterday.

I thank Douglas Ross for bringing the bill to this point. A lot of work goes into bringing a member's bill to stage 1. Douglas has worked with the very impressive Annemarie Ward, who is at the back of the chamber. We should congratulate her, too.

Russell Findlay: Will Graham Simpson take an intervention?

Graham Simpson: I would be delighted to.

Russell Findlay: The boss of an anti-drugs charity once told me that a recent anti-drugs campaign run by the Scottish Government was a very negative vibe and that we should use more positive images of drug taking. That bizarre and naive view says much about Scotland's harm reduction lobby. Does the member accept that it is the dominance of that lobby and its ideology that is influencing and directing the SNP's shameful vote today?

Graham Simpson: I do not know whether that is true, but I take the point. The member might be on to something, because it is strange that the SNP is set to vote against the bill. All that we are voting for today are the general principles. It is the same as with any bill. If a bill needs to be changed, that is what stages 2 and 3 are for.

Before I get into the meat of my speech, I want to say how powerful Annie Wells's speech was. It was probably the best speech that I have heard from Annie Wells among a number of very powerful speeches that she has given. That was her best.

Drugs deaths are Scotland's shame and today could be a day of shame for the Parliament if we vote the bill down at this point, because it is about something that the public believe should exist. If someone asks for help with addiction, they should get it, but right now that is not how our system works. That is why we have the worst drug deaths record in Europe.

We have around 500 rehab beds in Scotland, but only 140 are funded and accessible. The rest belong to charities or private providers, and they are shared with people who are seeking help for alcohol. Meanwhile, 28,600 people are on long-term methadone or buprenorphine, so that is one publicly funded rehab bed for every 200 people on methadone, never mind people with an alcohol addiction or an addiction to other non-opiate drugs.

We have already heard mention of the Thistle drug consumption facility, and the question was raised whether anyone has actually recovered through going to that facility. I think that the answer is no, but I will tell you what we have nearby. I saw shocking scenes on social media—

Alex Cole-Hamilton: Will the member give way?

Graham Simpson: Allow me to finish this. I saw on social media shocking scenes near that facility just the other day, with needles scattered everywhere and a tree with needles stuck in it. We will call it the needle tree. It is a monument to despair and death, and that is shocking. I will take the intervention.

Alex Cole-Hamilton: I am grateful to the member for giving way, but he will be aware that we were not pioneers in opening the Thistle centre. It is built on international evidence. There is evidence that the Thistle centre has already saved lives and is continuing to do so. Rather than castigating those people who are working valiantly at the front line of the drug deaths crisis, we need interventions such as the Thistle to be rolled out right across Scotland.

Graham Simpson: I have not seen any evidence that it is helping people to recover, and surely that is what we need to be doing.

Eighty per cent of consultation respondents backed the bill, but the committee chose to hear mainly from those who oppose it, and they are the very institutions whose policies have failed.

Here is the question: are we going to stand with failing systems or with the people who still believe that recovery is possible? If the bill needs to be refined—and Douglas Ross accepts that it needs refining—we do that at stage 2, even if it needs massive change. That is what the process is for.

Recovery should be not a privilege but a right. If we can make housing and education legal rights, we can make recovery a legal right. I say to the members who are being instructed to vote no today that they should show some backbone, give people a fighting chance and support the bill at stage 1. Do the right thing.

The Deputy Presiding Officer: We move to the closing speeches. Maggie Chapman will close on behalf of the Scottish Greens.

16:19

Maggie Chapman (North East Scotland) (Green): I begin by saying clearly that no one should suffer or die because they cannot access the support that they need to recover from addiction. Every life lost to drugs or alcohol is a tragedy and a reflection not of individual failure but of collective neglect.

That is why we in the Scottish Greens wholeheartedly share the motivation behind the bill, which is driven by compassion and a desire to ensure that people who are in the grip of addiction are not abandoned by the systems that are meant to help them. We absolutely agree with that goal, but, regrettably, given the evidence that the Health, Social Care and Sport Committee heard, much of which has been rehearsed today, we are concerned that the bill will not and cannot achieve what it promises. What is perhaps more troubling for us is that, according to experts in the field, the bill risks doing real harm along the way.

The question is not about whether people should have a right to recovery—of course they should. The question is about whether this particular bill would make that right real, and the evidence before us says that it would not.

The Scottish Drugs Forum has been clear that the bill would not confer any meaningful new rights. People already have the right to assessment and treatment; what they often lack is access to good-quality, trauma-informed, person-centred support. That access is blocked not by law but by capacity, workforce pressures, stigma and a lack of properly funded services.

Douglas Ross: Maggie Chapman is articulating what a lot of the vested interests say. Why does she believe that she knows more than the front-line experts who tell us that the bill is required?

Maggie Chapman: A lot of the front-line experts have told us the exact opposite and said that the bill threatens to cause real harm.

As the committee found, and as Rona Mackay stressed earlier, the bill risks entrenching a narrow, medicalised model of treatment. It gives decision-making power solely to health professionals, when we know that real recovery depends on relationships, trust and communities and on support that meets people where they are. As the minister articulated earlier, by focusing so heavily on a clinical diagnosis and prescribed treatments, the bill ignores the wider psychological, social and economic roots of addiction.

The committee's report highlights deep concerns that that approach could undermine the progress that is already being made through the national mission on drugs, the medication assisted treatment standards and the charter of rights for people affected by substance use. Those frameworks are built on human rights, empowerment and lived experience. They aim to shift power towards people in recovery, while the bill risks shifting power back to institutions.

I echo the concerns expressed by Patrick Harvie and Alex Cole-Hamilton about the bill's three-week statutory deadline for treatment. It sounds good, but it would be unworkable in practice and could backfire, by pressuring services to tick boxes rather than provide meaningful support. As the SDF has warned, we have seen before how targets can distort behaviour instead of improving outcomes. People could end up in preparatory sessions that are counted as treatment, rather than getting the care that they need. That is not compassion; that is bureaucracy.

The committee also heard that the bill's language, which is centred on "addiction" and "diagnosis", could deepen stigma. Emma Harper eloquently highlighted that. In addition to what she outlined, many people harmed by substance use would not fit the definition and might therefore be excluded, which would run directly counter to the inclusive, trauma-informed approach that Scottish Greens believe must underpin all public health work.

There would be risks in creating legally enforceable rights that the NHS could not deliver on. If people turned to the courts because services were overstretched, we would spend precious resources and time on litigation rather than on care. None of us wants that.

Addiction is not just a medical condition; it is a social justice issue. Poverty, trauma, inequality and isolation are its soil. We must nurture recovery not only through treatment but through housing, mental health support, community connection and dignity.

That is why the Scottish Greens call for continued investment in holistic, community-based services; for trauma-informed care that recognises the person before the patient; for harm reduction measures that save lives today, such as safer drug consumption facilities, access to naloxone, and housing first; and for ending the stigma that too often drives people away from support.

We do need legislation, but it must be constructed in ways that mean that it can actually achieve its aims. We do not have that in the bill. The changes that are required to it would result in a very different piece of legislation.

We know that we need legislative reform, some of which is not in our gift. It is clear that Westminster legislation hampers rather than supports the approach that we seek to take in Scotland.

Annie Wells: *[Made a request to intervene.]*

Graham Simpson: Will the member take an intervention?

The Deputy Presiding Officer: The member is about to conclude.

Maggie Chapman: Some members who are arguing in support of the bill today say that this is the last opportunity to do anything about addiction in the current session of Parliament. That is simply not true, and we know that legislation is never the whole solution. The national collaborative's charter of rights offers a strong foundation, and it includes the voices and experiences of the people it is meant to serve. It gives voice, agency and dignity to those who are most affected. We should strengthen that framework and not supplant it.

With respect for the intention behind the bill, but with deep regret and concern about its consequences, we cannot support the bill today. However, our rejection of the bill is not a rejection of recovery. It is a call for better services, better understanding and better compassion, because everyone deserves the chance to recover, not through legal wording but through a society that truly cares. We reiterate our commitment to play our full part to ensure that we create that caring society.

The Deputy Presiding Officer: Paul Sweeney will close on behalf of Scottish Labour.

16:26

Paul Sweeney (Glasgow) (Lab): I extend to Mr Ross my compliments on his work to develop the bill in concert with, in particular, Annemarie Ward and Stephen Wishart. They have worked very hard on it over a number of years in the current parliamentary session.

Soon after I was elected to the UK Parliament in 2017, we had a debate on this very issue in the House of Commons. At that time, there was division about the efficacy of certain interventions, but over time we have learned—in a school of negative learning in Scotland, unfortunately—what we need to do to make a positive difference, to save people's lives and to preserve and enhance life.

Today, many speakers have described personal experience of addiction and the pernicious effects that it has on families. For people from working-class families in the west of Scotland, the impacts run deep, and they have affected my family. I have

had relatives who have suffered premature death because of alcohol addiction and tobacco addiction, and other members have spoken powerfully about their personal experiences.

However, even I, after my election to represent the north-east of Glasgow in 2017, could not comprehend the sheer scale of the drug deaths emergency that confronted my constituents at that time. That happened in the context of the Government having cut £50 million from addiction services in this country over the previous five years, before I was elected, and having compounded it by almost prohibiting the routine prescribing of benzodiazepines through primary care practitioners. That combination was catastrophic. It structurally shifted Scotland's profile of drug-related deaths to be the worst in Europe, and that has been a persistent structural catastrophe for this country over the past decade. Last year, there were still 1,017 drug-related deaths. Since the Government announced the national emergency, we have had more than 6,000 preventable deaths.

It is incumbent on us all to understand what we can do together, with a unified purpose, to stop drug deaths as much as we can. Every circumstance will be different, but circumstances are often related. I remember meeting Annemarie Ward for the first time, in the Possilpoint community centre in 2019, along with Peter Krykant, who I also met for the first time at that event. We discussed the catastrophic drug-related deaths in the city and what needed to be done. It was clear that everything needed to be done—everything that would be useful and was backed by evidence. At that time, I resolved with Mr Krykant to support his work to open an unsanctioned overdose prevention centre in Glasgow.

That work helped to save nine people's lives; nine overdoses were reversed and 900 injections were supervised. During that period, I was able to build consensus with Mr Ross and others in the chamber about the need to at least test the efficacy of the programme. So far, the official pilot has encountered 60 medical emergencies and has demonstrated that its operation results in lives being preserved.

It is one thing to preserve lives, but it is another to allow people to have a reason to live. Often, encounters can be instrumental. That is why it is important that we stay unified. There is a role for harm reduction measures, but they have to be augmented and reinforced by a pathway to recovery. It is in no one's interest to sustain addiction for a minute longer than is necessary. We must provide a way out of addiction for people who are able and have the capacity to take it.

However, first and foremost, we need to preserve lives.

Annie Wells: I respect Paul Sweeney for what he is saying and for the work that he has done, but does he agree that, if we do not get one person to recovery from the Thistle, we are not doing enough? I understand that everyone's journey is not the same, but surely there should be one person on a recovery path from the Thistle centre.

Paul Sweeney: Ms Wells's point is important, and it reflects the point that Michael Marra, my colleague from Dundee, made, which was that we must meet people where they are, without judgment and without setting tests that they are doomed to fail, because too often the system becomes more important than the person's needs. We need to build a system that reflects the needs of individuals and does not set tests that they are doomed to fail.

When I worked as a volunteer on the overdose prevention pilot, a young lady came to that service and overdosed. She was involved in exploitative sex work. She had fled from a care setting because she was suffering sexual abuse, and she was sleeping rough in the city. She was terrified of accessing services, but it was through the initial conversation—that small act of love and compassion of giving someone a warm drink and having some conversation—that her life was saved, even though she had overdosed. She resolved, because of conversation and interaction, to seek the help that she needed. She was referred into rehabilitation and she is now thriving. That is an example of what we can achieve. There have already been some referrals from the Thistle, but it is certainly early days for that pilot. I would like to see a much more robust approach.

In the most recent survey of alcohol and drug partnerships, every single one reported that there are barriers to residential rehab. It can be catastrophic and deadly if timely intervention is not available. I was in Copenhagen, where the overdose prevention facilities operate in concert, in the same neighbourhood, with residential rehabilitation. People can be referred into residential rehab within five minutes of expressing that it is an appropriate course of action. We do not have such a facility in Glasgow right now. Although we are taking steps in the right direction, we need to go so much further.

That is why I urge the Government to at least give the bill a hearing at stage 2, to allow us to work in concert and sustain unity of purpose to try to improve the bill. I believe that there is a role for every aspect of these interventions in our society, which can stem the catastrophic flow of preventable death in our communities.

We must act as one. We cannot afford to split on this issue. I urge the Government to maintain some unity as we go through the legislative process.

16:33

Brian Whittle (South Scotland) (Con): Before I get into the main body of my closing speech on behalf of the Scottish Conservatives, I have to say that I, too, sit on the Health, Social Care and Sport Committee, and I am concerned that some members have skewed the committee report to fit a Scottish Government narrative. Although many of the witnesses had reservations—as do many members in the chamber—not one said that we should reject the bill at stage 1.

When we talk about this issue, I am acutely aware that we are speaking for the thousands who have died, the thousands who remain trapped in addiction and the countless family members who are sharing that crisis or mourning those whom we have lost.

Presiding Officer, “You keep talking, we keep dying” is a powerful phrase. I have lost count of how many times those damning words have been repeated to me by the people who are dealing with this tragedy every day. I have used the phrase in the chamber. It has lost none of its resonance, and it should embarrass us all that so many years have passed since it was first uttered.

My final debate in the previous session of Parliament was about the drug deaths crisis. That day, the Scottish Conservatives supported a Government motion that included agreeing to trial a safe drug consumption room. We did so despite our considerable reservations about the effectiveness of such a scheme. We chose to do so because we understood that we needed to try something new. We needed to break out of the endless cycle of rising drug deaths, blame, promises and nothing ever really changing. We chose to take the uncertain path because we needed to try something—anything and everything that we could—to maybe, just maybe, put an end to Scotland's greatest shame.

To this day, I and many of my fellow MSPs still have huge concerns about safer consumption rooms and are yet to be convinced about their effectiveness, but few if any of us regret making the choice to try. We were prepared to set aside our politics and our concerns because there was more in the motion that we agreed with. We decided that the risks of going forward were outweighed by the damage that is caused by standing still.

Today, it is not clear how far forward we have come. Drug deaths and levels of addiction remain stubbornly high, and the limited data coming from

the Thistle is hardly transformational. What the Scottish Government has done—what this Parliament has pushed for so far—has fallen way short.

That brings us to the Right to Addiction Recovery (Scotland) Bill, which says that if someone is brave enough to ask for help—that is a brave thing to do—they will get the help that they need when they need it. I can only imagine the feeling of summoning up the courage, strength and humility to ask for help only to be told that it is not there, or that it will not be there for weeks, months or longer. How must that wait feel? How must it feel for a person to be desperate for help but to know that, by the time that it arrives, they might no longer be ready or able to accept it? If that happens to someone once, how likely is it that they will be willing to ask for help ever again?

I appreciate that there are strongly held views across the chamber on the merits of my colleague Douglas Ross's bill in its current form. I know that it does not appeal to everyone as an approach, but to reject it now, before MSPs and organisations have had an opportunity to properly consider it and before they have had a chance to change it, feels, at best, short sighted and, at worst, politically motivated.

Patrick Harvie: With the best will in the world, I cannot remember many bills that have gone through the stage 1 process and led to a committee report that shows quite so many extensive changes being required. *[Interruption.]* If members will permit me, I will continue. Does the member accept that, if those changes were made at stage 2, we would arrive at the final day of stage 3 with a bill that was so fundamentally different that it would be a piece of legislation that had not been consulted on and on which witnesses had not had the opportunity to comment?

Brian Whittle: Does the member mean bills such as the Care Reform (Scotland) Bill, which had two thirds of it chopped away at stage 2? This is hardly the first time that members have radically altered a bill after stage 1. That bill was so thoroughly and comprehensively altered from its original form that it had to be renamed before it could be passed into law. Voting for the principles of the Right to Addiction Recovery (Scotland) Bill today binds members to absolutely nothing, except to agree that they will keep every option on the table.

I began my contribution with a call to arms for those dealing with the consequences of drug addiction, when I used the phrase, "You keep talking, we keep dying." That is a plea for action, but what happens if even the talking stops? What happens if we shut down discussion on an issue that continually highlights not only the Scottish

Government's failure but this Parliament's failure? Does falling silent and moving on do more to help?

There are certainly other conversations that the Parliament seems all too willing to have. We have spent days debating hundreds of amendments to the Housing (Scotland) Bill that will not build any houses; there have been three separate members' bills about the welfare of dogs; and, after the October recess, we return to late nights of amendments to the Land Reform (Scotland) Bill. Those are all issues of importance to the people of Scotland, but perhaps they are not of equal importance.

That said, we can debate serious and profoundly significant issues. As a Parliament, we quite rightly voted to let the debate on assisted dying continue. Despite my misgivings about the legislation in its current form, I was one of the members who backed the bill at stage 1. I did that because, although I am far from convinced that I can back the final bill, I am not opposed to the principles behind it. More than that, I want the opportunity to discuss and debate it further. Like members from across the chamber, I want to keep that conversation going. Bluntly, Presiding Officer, what does it say if members will overcome their discomfort and uncertainty to continue the debate on a bill about helping people to die but cannot bring themselves to do the same on a bill that is trying to help people who are dealing with addiction to live?

My plea to colleagues across the chamber is a simple one: if they believe in giving people who are dealing with addiction the help that they need when they need it, the bill must continue. Do not slam the door on a chance for Parliament and organisations to discuss, debate and build the bill into something better than it is today. I am looking directly at the Scottish Government's front-bench members—they should give themselves the opportunity to make the bill one that they can support. They should lodge the amendments that they think need to make a difference, and argue their points. Please support the principles of the bill at decision time. It commits them to nothing except continued consideration of resolutions to this persistent crisis; then, when the bill returns at stage 3, if they cannot vote for it, at least they will know that they tried.

16:40

Maree Todd: In closing, I thank all the members who contributed to the debate, and I reiterate my thanks to the many stakeholders who have made important and constructive contributions throughout the stage 1 scrutiny of the bill. I will begin by recognising the intention behind the Right to Addiction Recovery (Scotland) Bill. Improving access to treatment and recovery services is a

shared goal that reflects the urgency and importance of tackling the harms that are caused by substance use in Scotland. However, as the Health, Social Care and Sport Committee's stage 1 report makes clear, good intentions alone are not enough. Legislation must be workable, evidence based and capable of delivering real and lasting change.

Treatment is not a single intervention. Recovery is not a linear journey. A compassionate, person-centred approach recognises that recovery involves rebuilding lives, not just stopping substance use. It involves renewing hope and self-respect, fostering meaningful connections and enabling individuals to take charge of their own lives.

Brian Whittle: The minister says that there is not one pathway, but does she agree that if somebody comes forward and says, "Please help me to recover," they should get that recovery?

Maree Todd: We say about our MAT standards that when people come forward, they should get access to treatment immediately. In standard 1, we say that they should get same-day access to prescribing. We are absolutely aware of the issue that the member raises, and we are determined to rise and meet it.

I joined more than 2,000 people on the Scottish Recovery Consortium's recovery walk a couple of weeks ago. I will quote Natalie, who opened the event with a powerful, heart-rending testament to Peter Krykant, an activist who sadly passed away earlier this year. She said:

"Recovery, real recovery—what I call righteous recovery—is about reducing harm. It's about creating the conditions where people can heal. It's about building bridges, not just keeping people alive, but helping them to truly live."

The Scottish Government is committed to a multifaceted, rights-based approach. Our investment is delivering real change. The post-2026 strategic plan will expand the MAT standards to cover all drugs and alcohol and ensure that residential rehab is available to everyone who needs it, when they need it and wherever they live, for however long they need it.

Despite a 13 per cent reduction in drug deaths, the figures remain unacceptably high. We are developing a new alcohol and drug strategic plan, informed by lived experience and key reports, including those by Changing Lives, Audit Scotland and the people's panel. The plan will prioritise prevention and early intervention—areas that the committee rightly warned could be deprioritised under the bill.

The plan will also strengthen harm reduction and improve treatment pathways, underpinned by dignity, respect and agency. At its core, there will

be a continued commitment to a human rights-based approach, ensuring that everyone who is affected by alcohol and drugs is treated with dignity, respect and compassion and has agency to drive their own treatment and recovery plan. Scotland continues to lead the way with a public health response to alcohol and drugs issues. We remain committed to learning from international evidence and from best practice. It is our intention that the funding will be maintained to support the delivery of the new strategic plan.

Annie Wells: What would the minister say to the gentleman from Calton who said:

"There's no hope. I've tried to get treatment, and I just get sent away, put on methadone or onto an extra script".

Like so many others, he is asking why he is being left behind. Can the minister explain that to him?

Maree Todd: I reiterate to him that, if residential rehab is what he is seeking, we have increased the level of residential rehab and have invested £38 million in building more facilities and in increasing the bed capacity nationally. We are on target for 1,000 funded places a year, and we are dramatically improving.

Just this week, I spoke about the additional placement fund, which Rona Mackay mentioned in her speech. It is a flexible pot of funding that supports ADPs, so that when they have exhausted their pot of money, they can access the fund to support the placement of individuals into residential rehab or extend their stay, should that be needed. That is absolutely how we need to progress; we need a flexible, person-centred, rights-based approach.

As we approach the end of the national mission, we continue to work with stakeholders, including those with lived and living experience, in order to develop our future strategy that is built on what works and responds to what is needed. I recognise there is strong support across the chamber for the general principles of the bill and that some members may question the Scottish Government's position to oppose the legislation. I do not take the decision lightly. I recognise the strength of feeling across the chamber and the shared commitment to improving outcomes for people who are affected by substance use.

However, we have a responsibility to ensure that any legislative change is not only well intentioned but is workable, evidence based and capable of delivering real and lasting impact. That is the path that we are committed to. The Government remains laser focused on addressing the challenge of our unacceptably high drug and alcohol deaths rate. I am committed to working constructively with members across the chamber to ensure that we deliver on our mission.

Paul Sweeney rose—

Maree Todd: I am on my last sentence.

Our approach offers a broader, more inclusive, more sustainable path forward that truly meets the needs of individuals, families and communities across Scotland.

16:48

Douglas Ross: It is a dark day for the Scottish Parliament. I cannot think of another way to sum up the debate.

It has been a depressing afternoon, but there have been small moments of pride. I could not have been more proud to sit on the Scottish Conservative benches and listen to Annie Wells, Sue Webber and Brian Whittle, who gave speeches that were impassioned, informed and caring about individuals in their constituencies and regions, because they want us to do better. Those were matched by the contributions of Jackie Baillie, Alex Cole-Hamilton, Michael Marra, Graham Simpson and Paul Sweeney.

In summing up a debate about a bill that could save lives, I cannot pick out a single speech from members on the SNP or Green benches that was positive in any way. I think that that is a shame. I also think that, in the days, weeks or perhaps years to come, SNP and Green members will look back on this debate and regret what they have done. They will regret toeing the party line over an issue as important as people's lives.

Opportunities such as this one do not come along every day. Back benchers do not get many opportunities to take forward legislation that has overwhelming public support, is drafted by front-line experts and would save people's lives. This afternoon, we have one opportunity to keep the discussion going.

I say to SNP and Green members that we have not pressed our voting buttons yet. There is still an opportunity for people, and even for those in the Government, to change their position and say that they have listened to the debate and that maybe this issue is one that is worth considering during the debate, rather than one where members come into the chamber with a pre-arranged decision—that this issue is one where we can show that the Parliament can be reflective of all voices and that this Government will listen to all sides and simply allow a slightly longer discussion of such an important issue.

Patrick Harvie: I recognise the sincerity with which Douglas Ross speaks, but does he accept that the situation regarding the bill is not as simple as he presents it? Does he acknowledge, for example, that the submission that we have all received from Turning Point Scotland—front-line

experts, to use his words—raises the possibility that not only does the bill require improvement but that it could have harmful, unintended consequences by increasing the risk of relapse?

Douglas Ross: When I speak about front-line experts, I mean the people who drafted the bill—the people who, day in and day out, see the problems in Glasgow, Edinburgh, Aberdeen, Inverness and Dundee and want to see something happen about them. The ones that I am more suspicious of are those who are funded by the Scottish Government and whose jobs rely on funding from nationalist ministers. They will never be in favour of the bill, so, when they get invited to the Health, Social Care and Sport Committee, they will give critical evidence and say that we should not progress it. However, it is up to us—the democratically elected MSPs in the chamber—to say that although we can consider those views, we need to listen more, debate more and discuss more.

Members should be in no doubt that, if they vote against the bill tonight, that will—contrary to what Maggie Chapman thinks—shut off the final legislative opportunity to deal with the issue in this session, which I believe that we must take. Drug deaths have more than doubled in 10 years and are 15 times higher in our most deprived communities than in our least.

Russell Findlay: Some SNP members have talked about not wanting to stigmatise drug addicts. We have heard that word a lot this afternoon. Does Douglas Ross agree that suffering from apparent stigma is preferable by far to being killed by drugs?

Douglas Ross: It is. People are dying. As I said in my opening remarks, while we have been sitting here today, six more Scots have died—six by the end of today; tomorrow, another six; and, over the weekend, a dozen. Do SNP and Green members not care about that?

The issues about stigma that Emma Harper mentioned were addressed at committee—she might not agree with what was said, but they were raised and addressed there. However, surely, the fundamental thing is to save lives, and we have the opportunity to do that today.

As I said, drug deaths have doubled in 10 years. Alcohol deaths are at their highest level since 2008, and are four times higher in our most deprived communities than in our least. For seven straight years, Scotland has been the drug deaths capital not just of the United Kingdom but of Europe. It is embarrassing, and it is time that something was done about it. This is the time—we have an opportunity to do something about it. This is a crisis that was made in Scotland, and it is one

that can be fixed in Scotland, but not if we do not have willing participants in the Government.

I listened to Maree Todd's opening and closing remarks. She said, "Get behind the Government. We will keep doing this. We will do that." I am sorry, but this is a Government that took its "eye off the ball"—not my words, but those of a previous leader of that Government. This is a Government that has presided, year after year, over record drug and alcohol deaths. This is a Government that we should not be following. This is a Government that we have to change the course of, and that is what the bill seeks to do. We cannot continue to do the same things over and over again and expect different results.

This issue comes down to people—to real lives that are being lost and affected across Scotland. If I cannot convince SNP and Green members, maybe Debra can. Debra, 34, struggled with addiction for more than a decade. She was facing sentencing for shoplifting—a crime that she committed to pay for her addiction. At her drug treatment and testing order assessment, she begged to be put into rehab, as she did not want to continue with methadone treatment. Her lawyer argued for her request, but it was rejected as out of scope by her DTTO officer, and she was put back on methadone. Debra died of an overdose just a few months later. I ask any SNP and Green member to stand up and intervene if they think that Debra's case does not warrant our consideration of the bill for a few weeks or months longer. Debra deserves more time. You know that; I know that; we all know that.

If not Debra, what about Liam? He was 21. He had a history of childhood trauma, homelessness and severe mental health issues. He asked for rehab after multiple arrests for drug offences, but was placed on a four-month waiting list and told to engage with community services. He was on that waiting list when he overdosed and died. I ask again: does any SNP or Green member want to intervene and say that they are correct to vote down the bill at this stage and that Liam's case does not deserve or warrant further discussion?

If SNP and Green members do not want to do that, why would they vote for what the Government is asking them to vote for tonight? Why not give the bill a chance, for just a little bit longer? As Brian Whittle said, we might come back here at stage 3 and say no to the bill, because we have not made the changes, the bill has not been improved or there are still issues that stakeholders and front-line experts have issues with. Surely that is a better and a more defensible position than shutting the bill down today, here and now.

Paul Sweeney: Will the member take an intervention?

Douglas Ross: I will give way to Paul Sweeney.

The Presiding Officer: Mr Ross must begin to conclude.

Paul Sweeney: I thank the member for making a very powerful speech. I note that the Law Society of Scotland's recommendations pertain only to changes to sections 1, 2, 3 and 5 of the bill, but the bill has 11 sections. Surely it can be amended—it is eminently amendable—and there are ways to do that at the next stage.

The Presiding Officer: In conclusion, Mr Ross.

Douglas Ross: In conclusion, the bill is entirely amendable, as Paul Sweeney says. That is the simple choice that we have. Do we want to give the bill a chance by making those amendments and then coming back to see whether we can agree on their terms?

When Parliament was reconstituted, the late Donald Dewar said that, in this building, the Parliament would deliver

"Scottish solutions to Scottish problems".

We have a Scottish problem with drug and alcohol deaths, and we have a Scottish solution. I say to members that they should not let the perfect stand in the way of the good. Do not miss the opportunity to deal with the drug and alcohol crisis in Scotland. Please, please do not vote the bill down tonight. Give us a chance to keep going, keep discussing, keep debating and keep trying to keep people alive.

The Presiding Officer: That concludes the debate on the Right to Addiction Recovery (Scotland) Bill at stage 1.

Public Authorities (Fraud, Error and Recovery) Bill

The Presiding Officer: The next item of business is a debate on motion S6M-19275, in the name of Shirley-Anne Somerville, on the legislative consent motion for the Public Authorities (Fraud, Error and Recovery) Bill, which is United Kingdom legislation. I would be grateful if members who wish to speak in the debate were to press their request-to-speak buttons now.

16:58

The Cabinet Secretary for Social Justice (Shirley-Anne Somerville): This is an opportunity to speak to the motion in my name on legislative consent in respect of the Public Authorities (Fraud, Error and Recovery) Bill 2025. When I spoke to the previous consent motion in my name on the bill, I was clear that, although I support efforts to reduce fraud and error in public finances, that cannot be done at the expense of treating people with fairness, dignity and respect.

Today's motion relates to two areas in the bill for which I am happy to recommend legislative consent. I will also cover the overpayment provisions, for which I previously said that I would not recommend legislative consent and which the UK Government has subsequently amended to ensure that they do not apply to any devolved benefits, including those that are administered under agency agreement.

First, in regard to non-benefit payments, the UK Government proposes to use recovery and enforcement powers under the Social Security Administration Act 1992 to recover payments that it makes beyond social security. For example, using that legislation, it might seek to recover grants that it pays out.

I am content to recommend consent because, although the definition of "non-benefit payment" might be broad enough to encompass the recovery of devolved payments, the UK Government has confirmed in writing that it has no intention to recover such payments now or in the future, which renders any potential impacts on devolved matters theoretical only. Furthermore, future devolved payments that could be administered by the secretary of state and might fall within the scope of those powers could themselves require primary legislation and, subsequently, Scottish parliamentary consent, which would ensure due parliamentary process before any introduction.

In the bill as introduced, authorised Department for Work and Pensions staff would have been able to seize evidence relating to the commission of a

DWP offence—that is, an offence that relates to a social security fraud. The provisions have been amended and will allow authorised DWP staff to preserve evidence found that relates to any crime should they encounter it when entering or searching premises. There is precedent for that approach: immigration legislation allows immigration officers to seize evidence of non-immigration offences to ensure that it is not lost and can be passed to appropriate law enforcement authorities. Therefore, there is nothing in those provisions that conflicts with the principles that underpin the devolved social security system.

The provisions on overpayment recovery do not appear in the motion because the UK Government amended the bill to ensure that devolved benefits, including those paid under agency agreements, will not be subject to the new recovery powers. However, I know that they will be of interest to members.

I acknowledge that the UK Government has a duty to manage public finances responsibly. The Scottish ministers share that responsibility. However, it cannot be done at the expense of our principles and ethos.

A range of powers is already available to Social Security Scotland to recover overpayments that arise as a result of fraud and error. The agency's published error control strategy sets out that it already uses routine quality checking, data analysis and claim reviews to detect error and routinely recovers debt. Social Security Scotland's next set of annual accounts, which are due for publication in November, will set out that more than £9 million of overpayments were identified and corrected in the financial year 2024-25 as a result of fraud or error interventions, with almost £3 million of associated estimated future losses prevented.

Social Security Scotland has a long-established zero-tolerance approach to fraud, which is outlined in its published counter-fraud strategies, and a wide range of investigative tools at its disposal, including intelligence sharing, fraud reporting channels and the use of surveillance where appropriate. All of that is rightly designed to protect the public purse. Therefore, I reassure members that, although it is still maturing, the fraud and error service clearly adds considerable value in protecting the public purse.

Although we are content with many of the measures in the UK bill, the Scottish Government does not support the provisions that would allow the DWP to deduct money directly from a person's bank account without a court order or to suspend a driving licence. As a result, it will be necessary to adjust the working arrangements between the Governments to ensure that those specific new

powers do not apply to the recovery of devolved debt that was accrued while the DWP delivered benefits on our behalf under agency agreements.

However, I want to be clear that that does not mean that the approximately £35 million of historic debt that is covered by those arrangements will not be recovered. Officials are now in discussions with the DWP to identify the debts, the arrangements for transfer and, therefore, the options for recovering the debt in line with the extensive powers and administrative arrangements that are already at Social Security Scotland's disposal.

I move,

That the Parliament agrees that the relevant provisions of the Public Authorities (Fraud, Error and Recovery) Bill, introduced in the House of Commons on 22 January 2025, and subsequently amended, relating to clauses 78, 90, 98 and 99, and schedule 4, so far as these matters fall within the legislative competence of the Scottish Parliament, should be considered by the UK Parliament.

The Presiding Officer: I call Bob Doris on behalf of the Social Justice and Social Security Committee.

17:04

Bob Doris (Glasgow Maryhill and Springburn) (SNP): I will be brief, because this concerns a procedural issue.

The Social Justice and Social Security Committee considered a legislative consent memorandum on the Public Authorities (Fraud, Error and Recovery) Bill in June. At that time, the Scottish Government advised us that it had not seen the full provisions of the bill until it was laid on 22 January and was consequently unable to meet the normal timings for lodging an LCM, which is important. Despite that, there was still time for the committee to scrutinise the LCM and come to a view on part of the provisions and we were able to recommend consent on that basis.

The Cabinet Secretary for Social Justice made us aware that, due to the on-going engagement that was required to understand whether the bill and its numerous amendments would impact on Scotland, she expected that there would be a requirement to lodge a supplementary LCM, which we now have before us. The committee was made aware that, as the LCM was lodged on Friday 3 October, there will be no time for the committee to consider it, because a decision on the motion is required ahead of the final amendment stage at Westminster, which is due to commence on 15 October.

That is clearly less than satisfactory. The legislative consent process reflects a key principle that underpins devolution: that the UK Parliament will not normally legislate on devolved matters or

on changes to the boundaries of devolution without the Scottish Parliament's consent. The parliamentary committees play a key role in scrutinising provisions in UK bills that legislate on devolved matters and in coming to a view on whether the Scottish Parliament should recommend consent. It is essential that committees are provided with sufficient time to carry out that scrutiny, irrespective of the merits of any individual LCM.

I very much hope that the Scottish Government will emphasise to the UK Government how important the scrutiny role of Scotland's parliamentary committees is in considering LCMs in the future, in the hope that such situations do not occur again. However, in this instance, I can confirm that our committee agreed that the LCM should go directly to the chamber.

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17:06

Alexander Stewart (Mid Scotland and Fife) (Con): The Parliament's primary duty is to pass effective legislation, which, as members will agree,

can be done only if there is effective scrutiny across the chamber and through committees.

The LCM before us relates to an important issue: fraud prevention. The Cabinet Secretary for Social Security and David Wallace attended the Finance and Public Administration Committee back in September. Every penny of public money that is lost to fraud is a penny taken from the hard-working taxpayers of Scotland—money that could be spent on our schools, hospitals or roads. Nurses, teachers and workers across Scotland deserve a Parliament that protects their contributions with unwavering diligence. We do not serve Scots by cutting corners or bypassing domestic processes. Regrettably, the process surrounding this consent motion has done that. For those reasons, the Scottish Conservatives will not support the legislative consent motion.

Fraud in the public sector does not just mean financial loss—it erodes public trust. When fraudsters exploit the system, they undermine the social contract that binds hard-working Scots to the services that they fund. The £36 million fraudulent benefit claim that was highlighted by an article in *The Scotsman* back in August is a stark reminder of the challenges that are being faced.

The Finance and Public Administration Committee recently sought answers from David Wallace from Social Security Scotland during his appearance before the committee on 16 September. His testimony was essential to members understanding our recovery of those funds. It was alarming to find that only 10 per cent of the funds lost to fraud in 2024-25 have been recovered. That is why the Scottish Conservatives agree with the principle of recovering wrongfully claimed funds and believe that the fraud-fighting toolkit must be modernised and strengthened.

The Presiding Officer: I am aware that members are finding this difficult to follow, but I think that they sometimes underestimate how clearly their voices are carrying. Mr Stewart, please continue.

Alexander Stewart: An LCM relating to the Public Authorities (Fraud, Error and Recovery) Bill was considered by the Finance and Public Administration Committee in spring 2025, but that LCM only considered limited provisions in the bill. The Parliament then voted to give consent on 25 June 2025 in relation to clauses 72, 75, 78, 81, 83, 87 and 98. The LCM did not give a consent steer on the other clauses—namely clauses 89, 90, 92, 94 and 95—so the committee did not scrutinise them properly. The Scottish Government finally lodged a supplementary memorandum of consent on 3 October for the remaining bits of the bill, but the committee did not get the chance to scrutinise them at all.

We accept that, in this instance, there have been issues about the timescales for deliberation at Westminster and in Holyrood, and the October recess has an impact on that. However, we wish to put on record our belief that there should be the fullest scrutiny of all aspects of all legislation. For those reasons, we shall not support the LCM this evening.

17:09

Michael Marra (North East Scotland) (Lab): Scottish Labour will support the legislative consent motion. It is absolutely right to say that the UK Government is seeking to update the welfare system and deliver value for money for taxpayers. The legislation will give the DWP the ability to gather necessary information and to fully investigate fraud and error. Those are sensible updates that will improve the system and bring it into the 21st century.

The main reason why the legislative consent motion is needed is that the Scottish Government is continuing agency agreements for severe disablement allowance and industrial injuries disablement benefit. The latter benefit was devolved to Scotland nearly a decade ago, yet the SNP Government has sat on its hands. Two and a half years ago, when I launched the injury time campaign alongside GMB and the Professional Footballers Association Scotland, calling for repeated head injuries in football to be classified as industrial injuries, the cabinet secretary told me that the benefit could not be transferred because the records were on paper and case transfer would take too long.

Just last month, the same SNP Government extended its agency agreement with the DWP until 2027—a decision that was rightly condemned by Amanda Kopel, widow of Dundee United legend Frank Kopel, who tragically lost his life to dementia. It begs the question: what on earth has the SNP Government been doing for the past two years? If you do not start a process, there is no hope of ever finishing it. The First Minister's statement yesterday that devolution has reached its limits is rather ridiculous when the SNP Government has not even bothered to enact the full powers that are currently at its disposal.

The Cabinet Secretary for Social Justice makes much of the different approach that she wants to take in Scotland. That different approach means, reportedly, having no plan to recover the £36 million in fraudulent benefit claims in Scotland. In her speech, she made reference to some belated moves to develop a plan.

Last month, it was revealed that the SNP Government has a 10 per cent recovery rate for benefit fraud and error, which means that £9 in

every £10 is lost. When I asked the cabinet secretary at the Finance and Public Administration Committee whether she thought that that was good enough, she refused to say. I know what I think, and I believe that most Scots would agree with me. Just last month, Audit Scotland confirmed that position in its report on adult disability payment, noting:

“there is no timescale for when Social Security Scotland can consider incorrect payments due to client error or fraud.”

It is no wonder that Scotland's finances are in such a mess when that is the approach taken by this incompetent, knackered SNP Government.

17:12

Lorna Slater (Lothian) (Green): The Scottish Greens have serious concerns about the Public Authorities (Fraud, Error and Recovery) Bill. The bill provides sweeping powers to investigate the bank accounts of those who claim social security, yet the DWP already has powers to tackle fraud. Concerns have been raised by disabled people's organisations, Citizens Advice Scotland and even the banks themselves that people's privacy rights will be further intruded on as a result of the changes. There has been no clear justification that the currently held powers are insufficient and that further change is needed.

The bill fails to distinguish between overpayment due to error on the part of the DWP or on the part of the recipient and overpayment due to fraud. Although some overpayments cannot reasonably be noticed by the recipient, the bill would allow unjust investigations and could result in the money that claimants depend on being withdrawn. It appears that the DWP has not learned its lesson from those who have been pushed into poverty by universal credit deductions.

Today's LCM relates to clause 78 of and schedule 4 to the bill, as well as to clauses 90, 98 and 99, on non-benefit payments. With regard to clauses 90, 98 and 99, the memorandum notes:

“the UK Government has confirmed that there is no intent to use these powers in relation to devolved payments”

and that

“the provisions are not intended to interact with devolved functions and would relate to payments for which UK Government has responsibility.”

Although the current Government might not intend to do so, we are not comfortable simply taking the UK Government's word for it, and who knows what a future UK Government may make of the powers? The Government could have explicitly exempted Scotland from the provisions, as it has from other parts of the bill, but it did not.

In bringing non-benefit payment into scope, the intent appears to be to apply investigatory powers to grants as well as to social security payments. However, the definition of non-benefit payment is extremely broad—a concern that is also noted in the memorandum.

For those reasons, as well as the wider concerns raised by the third sector, the Scottish Greens suggest that we do not grant legislative consent.

17:14

Shirley-Anne Somerville: I thank members for their contributions and point out that the motion that we are discussing could not be lodged until the UK Government tabled its amendments, which was not done until last week. I share the Parliament's frustration about the timetabling of the LCM and the fact that the Social Justice and Social Security Committee was not able to scrutinise it in the proper manner. That is a reflection of the timetable followed by the UK Government for amendments at the House of Lords report stage and the third reading of the bill in the Lords. I appreciate that that is frustrating for the Parliament; it is also frustrating for the Government.

I gently point out to members of that committee that, some time ago, I made it clear that I was not willing to accept some aspects of the bill. I am not aware of the committee inviting me back for further discussion of the principles behind the stance that I took, even before an LCM was in place.

Bob Doris: I am happy to put on the record that the Social Justice and Social Security Committee recommended the various provisions in the LCM to the chamber, based on the evidence that the cabinet secretary gave when she came to the committee. There is a more general point in relation to process, irrespective of the merits of the subsequent LCM, which is that the Scottish Parliament committee should have time to scrutinise the bill more generally.

Shirley-Anne Somerville: The deputy convener makes a fair point about the time that the committee needs to scrutinise the legislation.

Michael Marra touched on the industrial injuries disablement benefit. I gently say to him that, if he thinks that the Scottish Government has sat on its hands, I wonder what he thinks about consecutive UK Governments—Tory and Labour—that have not changed that benefit for literally decades upon decades. If they had done something, the records would not be sitting archived in a paper format in warehouses down south. That is one of the challenges that we are facing. From the consultation that the Scottish Government undertook, it came out that stakeholders wished

us to do a full review of a benefit that had not been looked at for many a decade rather than to make small changes at this point. I am happy to carry out the work that reflects the consultation's recommendations.

In my opening remarks, I said that the Parliament has already provided Social Security Scotland with a range of powers to recover benefit overpayments. We have not chosen to include powers to make deductions directly from bank accounts or to disqualify people from driving. I reflect on some of the evidence that the UK Government received when it looked at the issue. For example, concerns were raised by the Child Poverty Action Group, which said:

"Direct deduction orders do not come with sufficient safeguards, meaning more risk of hardship and unfairness for families. ... This measure risks dragging these families into further hardship and even destitution by giving the DWP more capacity to deduct from a bank account whatever income or capital they do have."

Citizens Advice across Warwickshire raised specific concerns about the impact of taking away driving licences from those in rural or semi-rural areas, which "seems like unfair treatment." Citizens Advice said:

"New powers allowing the DWP to directly recover debts from people's bank accounts are likely to affect people in the most vulnerable circumstances."

Because of those types of stakeholder engagement, we are not supportive of the UK Government's proposals. However, as I have said, that does not mean that payments will not be recovered. That is a matter of the how, rather than the if. Members of the committees will receive correspondence from David Wallace and me on fraud and error. In due course, I will be happy to discuss the further details in those letters with committees, should they wish me to do so.

The Presiding Officer: That concludes the debate on the legislative consent motion for the Public Authorities (Fraud, Error and Recovery) Bill, which is United Kingdom legislation.

Planning and Infrastructure Bill

17:19

The Presiding Officer (Alison Johnstone):

The next item of business is consideration of motion S6M-19276, in the name of Gillian Martin, on the legislative consent motion for the Planning and Infrastructure Bill, which is United Kingdom legislation.

Motion moved,

That the Parliament agrees that the relevant provisions of the Planning and Infrastructure Bill, introduced in the House of Commons on 11 March 2025, and subsequently amended, relating to clauses 18 to 24, 46 and 112, so far as these matters fall within the legislative competence of the Scottish Parliament or alter the executive competence of the Scottish Ministers, should be considered by the UK Parliament.—[*Graeme Dey*]

17:19

Douglas Lumsden (North East Scotland)

(Con): The Scottish National Party Government is selling Scotland's countryside to the highest bidder. The Cabinet Secretary for Climate Action and Energy is quite happy to travel the world, but she cannot even be bothered to meet campaign groups in her constituency. She would rather spend her time in New York than in New Deer. What a shameful display.

The motion before us will silence communities. That will forever be the SNP Government's legacy to communities that are impacted by megapylons. Energy companies want to destroy our countryside to reward their shareholders, and the Scottish ministers are complicit in that.

In August, community groups came together in the Highlands, because they were concerned about what they were seeing in their communities—battery storage facilities, substations, hydrogen plants and monster pylons. Such environmental vandalism is endorsed by the devolved SNP Government. I was there in the audience. Two SNP MSPs, including a Government minister, signed up to recognising and valuing local democracy and the pivotal role that all our community councils play in ensuring that democracy is respected, and to undertaking to do all that we can across our respective parties to secure urgent debates at Holyrood and in the House of Commons.

I thought that, at last, we might be getting somewhere, but, since then, the SNP Government has failed to bring the issue to the chamber for debate. The SNP MSPs misled the local community because they knew what a backlash they would have received at the meeting if they had told the truth. I have written to the minister

who signed up to the declaration and to the Cabinet Secretary for Climate Action and Energy, Gillian Martin, to ask when the Government will hold a debate on the matter, but I have not been able to get an answer, which is shameful.

Community councils in areas of the north-east that are impacted by monster pylons and large-scale energy projects will meet to discuss the issue in Stonehaven this weekend. Will the cabinet secretary be there? No, of course she will not, because she is not interested in listening to the voices of concerned communities.

The legislative consent motion before us will make it easier for this rotten, tired SNP Government to push through energy projects. It is quite happy to sacrifice our rural communities to suit its agenda. It wants to desecrate our countryside, and the LCM will enable the desecration of our countryside. The monster pylons that I am talking about are absolutely huge, and communities are rightly worried.

However, the issue is about more than just the size of the pylons. Houses are being devalued as we speak, and farmers will not be able to farm in the vicinity of the pylons. The bill will fast-track the building of megapylons and other electricity infrastructure, ignoring communities.

There is a huge inequality in the present system. It is rigged in favour of energy companies. We have a David versus Goliath situation, in which energy companies with deep pockets face community groups that rely on volunteers and crowdfunding. It is a disgrace. We need to have a fair system that puts community voices at the heart of the consenting process, rather than the present system, which looks to silence them.

17:22

The Minister for Parliamentary Business and Veterans (Graeme Dey): I am not at all sure how any of what we have just heard is in any way relevant to the legislative consent motion before us, which is the matter at hand. I will not dignify what we have just heard by responding to it. Instead, I think that it would be helpful to provide some background to members on why we are seeking Parliament's approval for the LCM on the UK Planning and Infrastructure Bill.

Although land use and planning in Scotland are devolved, the powers to legislate for the generation, transmission, distribution and supply of electricity are reserved. The Scottish ministers determine applications to construct or install electricity infrastructure under the Electricity Act 1989. The Scottish Government has long called for that system to be reformed, for the relevant powers to be given to the Scottish ministers and

for the process to be modernised, as it has been across other parts of the United Kingdom.

Having finally recognised that the Scottish consenting process needed to be reformed, the previous Conservative UK Government committed to a review in November 2023. Thankfully, those plans were continued by the current UK Labour Government, and UK and Scottish Government officials have worked together in close collaboration on the proposed reforms.

Clauses 18 to 24 of the bill relate to electricity infrastructure consenting in Scotland, and clauses 46 and 112 relate to harbour processing fees. As the proposed provisions seek to alter the competence of the Scottish ministers, they require legislative consent.

As I have set out, the changes that are proposed in clauses 18 to 24 are intended to reform outdated and inefficient elements of the electricity infrastructure consenting process. The main changes are: strengthening the pre-application requirements and procedures by—for the first time—making them statutory and allowing communities to share their views earlier in the process; creating a new, reporter-led procedure in response to an objection from a local planning authority; reducing the administrative burden of automatically having to have a public inquiry, while retaining that as an option; and moving from a lengthy judicial review process to one of statutory appeals, in alignment with existing processes under the Town and Country Planning (Scotland) Act 1997.

The Scottish Government intends to consult on proposals for secondary legislation as soon as possible after the bill has received royal assent. That consultation will seek views from a wide range of stakeholders, including communities, public bodies and the industry, so that all voices can be heard in shaping the future of the process in Scotland.

In addition, I welcome the productive engagement between the Scottish Government and the UK Government, which has resulted in amendments to clause 46 and clause 112 of the bill. Those clauses will ensure that the commencement of all provisions relating to the new system of harbour revision order fees in Scotland will be a matter for Scottish ministers only. The UK Government's decision to make those amendments in a devolved area reflects a constructive approach to devolution, and I acknowledge that.

I therefore ask Parliament to approve the motion for legislative consent in relation to the aforementioned clauses in the Planning and Infrastructure Bill.

The Presiding Officer: The question on the motion will be put at decision time.

Motion without Notice

17:25

The Presiding Officer (Alison Johnstone): I am minded to accept a motion without notice, under rule 11.2.4 of standing orders, that decision time be brought forward to now. I invite the Minister for Parliamentary Business to move the motion.

Motion moved,

That, under Rule 11.2.4, Decision Time be brought forward to 5.26 pm.—[*Graeme Dey*]

Motion agreed to.

Decision Time

17:26

The Presiding Officer (Alison Johnstone):

There are three questions to be put as a result of today's business. The first question is, that motion S6M-19128, in the name of Douglas Ross, on the Right to Addiction Recovery (Scotland) Bill at stage 1, 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 the digital voting system.

17:26

Meeting suspended.

17:29

On resuming—

The Presiding Officer: We come to the vote on motion S6M-19128, in the name of Douglas Ross, on the Right to Addiction Recovery (Scotland) Bill at stage 1. Members should cast their votes now.

The vote is closed.

Liam McArthur (Orkney Islands) (LD): On a point of order, Presiding Officer. My device was having difficulty connecting, and it appears that it calculated my vote as a no, when I should have voted yes.

The Presiding Officer: I am unable to amend a recorded vote, Mr McArthur.

For

Baillie, Jackie (Dumbarton) (Lab)
 Balfour, Jeremy (Lothian) (Ind)
 Bibby, Neil (West Scotland) (Lab)
 Boyack, Sarah (Lothian) (Lab)
 Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Carlaw, Jackson (Eastwood) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Choudhury, Foysol (Lothian) (Ind)
 Clark, Katy (West Scotland) (Lab)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Dowey, Sharon (South Scotland) (Con)
 Duncan-Glancy, Pam (Glasgow) (Lab)
 Eagle, Tim (Highlands and Islands) (Con)
 Ewing, Fergus (Inverness and Nairn) (Ind)
 Findlay, Russell (West Scotland) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallacher, Meghan (Central Scotland) (Con)
 Golden, Maurice (North East Scotland) (Con)
 Gosal, Pam (West Scotland) (Con)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Greene, Jamie (West Scotland) (LD)
 Griffin, Mark (Central Scotland) (Lab)
 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)
 Lennon, Monica (Central Scotland) (Lab)
 Leonard, Richard (Central Scotland) (Lab)
 Lumsden, Douglas (North East Scotland) (Con)
 Marra, Michael (North East Scotland) (Lab)
 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) [Proxy vote cast by Michael Marra]
 Regan, Ash (Edinburgh Eastern) (Alba)
 Rennie, Willie (North East Fife) (LD)
 Ross, Douglas (Highlands and Islands) (Con)
 Russell, Davy (Hamilton, Larkhall and Stonehouse) (Lab)
 Sarwar, Anas (Glasgow) (Lab)
 Simpson, Graham (Central Scotland) (Reform)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Sweeney, Paul (Glasgow) (Lab)
 Villalba, Mercedes (North East Scotland) (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)
 Wishart, Beatrice (Shetland Islands) (LD)

Against

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)
 Chapman, Maggie (North East Scotland) (Green)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Don-Innes, Natalie (Renfrewshire North and West) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dornan, James (Glasgow Cathcart) (SNP)
 Dunbar, Jackie (Aberdeen Donside) (SNP)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (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)
 Lochhead, Richard (Moray) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Gillian (Central Scotland) (Green) [Proxy vote cast by Ross Greer]
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (Ind)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McArthur, Liam (Orkney Islands) (LD)

McKee, Ivan (Glasgow Provan) (SNP)
 McLennan, Paul (East Lothian) (SNP)
 McNair, Marie (Clydebank and Milngavie) (SNP)
 Minto, Jenni (Argyll and Bute) (SNP)
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)
 Robertson, Angus (Edinburgh Central) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Slater, Lorna (Lothian) (Green)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP) [Proxy vote cast by Fulton MacGregor]
 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)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)
 Yousaf, Humza (Glasgow Pollok) (SNP)

The Presiding Officer: The result of the division on motion S6M-19128, in the name of Douglas Ross, on the Right to Addiction Recovery (Scotland) Bill at stage 1, is: For 52, Against 63, Abstentions 0.

Motion disagreed to.

The Presiding Officer: The next question is, that motion S6M-19275, in the name of Shirley-Anne Somerville, on the legislative consent motion on the Public Authorities (Fraud, Error and Recovery) Bill, which is United Kingdom legislation, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

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)
 Baillie, Jackie (Dumbarton) (Lab)
 Balfour, Jeremy (Lothian) (Ind)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Bibby, Neil (West Scotland) (Lab)
 Boyack, Sarah (Lothian) (Lab)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Brown, Siobhian (Ayr) (SNP)
 Choudhury, Foysol (Lothian) (Ind)
 Clark, Katy (West Scotland) (Lab)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Constance, Angela (Almond Valley) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Don-Innes, Natalie (Renfrewshire North and West) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dornan, James (Glasgow Cathcart) (SNP)
 Dunbar, Jackie (Aberdeen Donside) (SNP)
 Duncan-Glancy, Pam (Glasgow) (Lab)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)

Gougeon, Mairi (Angus North and Mearns) (SNP)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Gray, Neil (Airdrie and Shotts) (SNP)
 Greene, Jamie (West Scotland) (LD)
 Griffin, Mark (Central Scotland) (Lab)
 Harper, Emma (South Scotland) (SNP)
 Haughey, Clare (Rutherglen) (SNP)
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)
 Hyslop, Fiona (Linlithgow) (SNP)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lennon, Monica (Central Scotland) (Lab)
 Leonard, Richard (Central Scotland) (Lab)
 Lochhead, Richard (Moray) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Marra, Michael (North East Scotland) (Lab)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (Ind)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McArthur, Liam (Orkney Islands) (LD)
 McKee, Ivan (Glasgow Provan) (SNP)
 McLennan, Paul (East Lothian) (SNP)
 McNair, Marie (Clydebank and Milngavie) (SNP)
 McNeill, Pauline (Glasgow) (Lab)
 Minto, Jenni (Argyll and Bute) (SNP)
 Mochan, Carol (South Scotland) (Lab)
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)
 O'Kane, Paul (West Scotland) (Lab) [Proxy vote cast by Michael Marra]
 Rennie, Willie (North East Fife) (LD)
 Robertson, Angus (Edinburgh Central) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Russell, Davy (Hamilton, Larkhall and Stonehouse) (Lab)
 Sarwar, Anas (Glasgow) (Lab)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP) [Proxy vote cast by Fulton MacGregor]
 Stewart, Kaukab (Glasgow Kelvin) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Sweeney, Paul (Glasgow) (Lab)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Michelle (Falkirk East) (SNP)
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Villalba, Mercedes (North East Scotland) (Lab)
 Whitfield, Martin (South Scotland) (Lab)
 Whitham, Elena (Carrick, Cumnock and Doon Valley) (SNP)
 Wishart, Beatrice (Shetland Islands) (LD)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

Burgess, Ariane (Highlands and Islands) (Green)
 Chapman, Maggie (North East Scotland) (Green)
 Ewing, Fergus (Inverness and Nairn) (Ind)
 Greer, Ross (West Scotland) (Green)
 Harvie, Patrick (Glasgow) (Green)
 Halcro Johnston, Jamie (Highlands and Islands) (Con)
 Mackay, Gillian (Central Scotland) (Green) [Proxy vote cast by Ross Greer]
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Simpson, Graham (Central Scotland) (Reform)
 Slater, Lorna (Lothian) (Green)

Abstentions

Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Carlaw, Jackson (Eastwood) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Dowe, Sharon (South Scotland) (Con)
 Eagle, Tim (Highlands and Islands) (Con)
 Findlay, Russell (West Scotland) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallacher, Meghan (Central Scotland) (Con)
 Golden, Maurice (North East Scotland) (Con)
 Gosal, Pam (West Scotland) (Con)
 Hoy, Craig (South Scotland) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Kerr, Stephen (Central Scotland) (Con)
 Lumsden, Douglas (North East Scotland) (Con)
 Mountain, Edward (Highlands and Islands) (Con)
 Mundell, Oliver (Dumfriesshire) (Con)
 Ross, Douglas (Highlands and Islands) (Con)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Webber, Sue (Lothian) (Con)
 Wells, Annie (Glasgow) (Con)
 White, Tess (North East Scotland) (Con)
 Whittle, Brian (South Scotland) (Con)

The Presiding Officer: The result of the division on motion S6M-19275, in the name of Shirley-Anne Somerville, on the legislative consent motion on the Public Authorities (Fraud, Error and Recovery) Bill, is: For 81, Against 10, Abstentions 23.

Motion agreed to,

That the Parliament agrees that the relevant provisions of the Public Authorities (Fraud, Error and Recovery) Bill, introduced in the House of Commons on 22 January 2025, and subsequently amended, relating to clauses 78, 90, 98 and 99, and schedule 4, so far as these matters fall within the legislative competence of the Scottish Parliament, should be considered by the UK Parliament.

The Presiding Officer: The final question is, that motion S6M-19276, in the name of Gillian Martin, on the legislative consent motion on the Planning and Infrastructure Bill, which is United Kingdom legislation, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

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)
 Baillie, Jackie (Dumbarton) (Lab)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Bibby, Neil (West Scotland) (Lab)
 Boyack, Sarah (Lothian) (Lab)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Brown, Siobhian (Ayr) (SNP)
 Burgess, Ariane (Highlands and Islands) (Green)
 Chapman, Maggie (North East Scotland) (Green)
 Choudhury, Foyso (Lothian) (Ind)
 Clark, Katy (West Scotland) (Lab)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Constance, Angela (Almond Valley) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Don-Innes, Natalie (Renfrewshire North and West) (SNP)

Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dornan, James (Glasgow Cathcart) (SNP)
 Dunbar, Jackie (Aberdeen Donside) (SNP)
 Duncan-Glancy, Pam (Glasgow) (Lab)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (Ind)
 Fairlie, Jim (Perthshire South and Kinross-shire) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Gougeon, Mairi (Angus North and Mearns) (SNP)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Gray, Neil (Airdrie and Shotts) (SNP)
 Greene, Jamie (West Scotland) (LD)
 Greer, Ross (West Scotland) (Green)
 Griffin, Mark (Central Scotland) (Lab)
 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)
 Lennon, Monica (Central Scotland) (Lab)
 Leonard, Richard (Central Scotland) (Lab)
 Lochhead, Richard (Moray) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Gillian (Central Scotland) (Green) [Proxy vote cast by Ross Greer]
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Marra, Michael (North East Scotland) (Lab)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (Ind)
 Matheson, Michael (Falkirk West) (SNP)
 McAllan, Màiri (Clydesdale) (SNP)
 McArthur, Liam (Orkney Islands) (LD)
 McKee, Ivan (Glasgow Provan) (SNP)
 McLennan, Paul (East Lothian) (SNP)
 McNair, Marie (Clydebank and Milngavie) (SNP)
 McNeill, Pauline (Glasgow) (Lab)
 Minto, Jenni (Argyll and Bute) (SNP)
 Mochan, Carol (South Scotland) (Lab)
 Nicoll, Audrey (Aberdeen South and North Kincardine) (SNP)
 O'Kane, Paul (West Scotland) (Lab) [Proxy vote cast by Michael Marra]
 Rennie, Willie (North East Fife) (LD)
 Robertson, Angus (Edinburgh Central) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Russell, Davy (Hamilton, Larkhall and Stonehouse) (Lab)
 Sarwar, Anas (Glasgow) (Lab)
 Simpson, Graham (Central Scotland) (Reform)
 Slater, Lorna (Lothian) (Green)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Collette (East Kilbride) (SNP) [Proxy vote cast by Fulton MacGregor]
 Stewart, Kaukab (Glasgow Kelvin) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Sweeney, Paul (Glasgow) (Lab)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Michelle (Falkirk East) (SNP)
 Todd, Maree (Caithness, Sutherland and Ross) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Tweed, Evelyn (Stirling) (SNP)
 Villalba, Mercedes (North East Scotland) (Lab)
 Whitfield, Martin (South Scotland) (Lab)
 Whitham, Elena (Carrick, Cumnock and Doon Valley)

(SNP)

Yousaf, Humza (Glasgow Pollok) (SNP)

Against

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)
 Eagle, Tim (Highlands and Islands) (Con)
 Findlay, Russell (West Scotland) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Gallacher, Meghan (Central Scotland) (Con)
 Gosal, Pam (West Scotland) (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)
 Mountain, Edward (Highlands and Islands) (Con)
 Mundell, Oliver (Dumfriesshire) (Con)
 Ross, Douglas (Highlands and Islands) (Con)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Webber, Sue (Lothian) (Con)
 Wells, Annie (Glasgow) (Con)
 White, Tess (North East Scotland) (Con)
 Whittle, Brian (South Scotland) (Con)

Abstentions

Balfour, Jeremy (Lothian) (Ind)

The Presiding Officer: The result of the division on motion S6M-19276, in the name of Gillian Martin, on the legislative consent motion on the Planning and Infrastructure Bill, is: For 87, Against 23, Abstentions 1.

Motion agreed to,

That the Parliament agrees that the relevant provisions of the Planning and Infrastructure Bill, introduced in the House of Commons on 11 March 2025, and subsequently amended, relating to clauses 18 to 24, 46 and 112, so far as these matters fall within the legislative competence of the Scottish Parliament or alter the executive competence of the Scottish Ministers, should be considered by the UK Parliament.

The Presiding Officer: That concludes decision time.

Cambuslang Jobcentre (Proposed Closure)

The Deputy Presiding Officer (Liam McArthur): The final item of business is a members' business debate on motion S6M-18364, in the name of Clare Haughey, on opposition to the proposed closure of Cambuslang jobcentre. The debate will be concluded without any question being put. I invite members who wish to participate in the debate to press their request-to-speak buttons.

Motion debated,

That the Parliament condemns the proposed closure of jobcentres across the UK, including Cambuslang Jobcentre in the Rutherglen constituency, by the UK Government.

17:36

Clare Haughey (Rutherglen) (SNP): In January 2017, I stood up in the chamber to speak in my colleague Bob Doris's debate on proposed jobcentre closures in the Glasgow region, including Cambuslang jobcentre in my constituency. After a huge effort from the local community, local organisations, trade unions, activists and elected members, Cambuslang jobcentre was saved. Eight years later, communities in my constituency find themselves in exactly the same situation, albeit under a Labour Government rather than a Tory Government at Westminster.

The Department for Work and Pensions has announced that Cambuslang jobcentre is to close, with all services being relocated to Rutherglen. In 2017, my colleague Jamie Hepburn made the point that the decision to close particular jobcentres seemed to be driven by the fact that lease arrangements for buildings were coming to an end. Strangely enough, the DWP's lease in Cambuslang is due to end in early 2026.

The DWP has claimed that the jobcentre's proposed closure is part of its plans to leave "older, poorer-quality buildings". That supposed justification would be risible if it was not so insulting. Cambuslang jobcentre is situated in a bright, accessible, modern building in a central location in the town. It is co-located with other vital services including the award-winning employment champion Routes to Work South, which has just celebrated its 20th year of operation. In fact, the jobcentre is in such a great location that the DWP invested more than £200,000 of public money in new doors and closed-circuit television just a couple of years ago. The DWP rationale simply does not wash with the residents of Cambuslang and it does not wash with me.

Hundreds of local residents have now signed my petition against the closure, and many of them have shared their stories with me. Those people would be seriously impacted by any closure, and I am thankful for their candidness. Time and again, I have heard fears around accessibility, travel time and the threat of punitive sanctions for being late or missing an appointment.

Cambuslang community council is a well-kent and well-respected organisation that is rooted in the communities that its members serve and it knows them inside out. It has been unequivocal in its opposition to any closure, citing the disproportionate impact that it would have on vulnerable people and those who live in areas of deprivation, and I agree with it entirely. The community council is fiercely protective of local services—it successfully launched a banking hub in the face of the withdrawal of high street banks, for example—and I commend its continued commitment to Cambuslang.

I also put on the record my thanks to the many local businesses and shops that have displayed the poster about my campaign and petition.

In 2017, the previous UK Government said that, if it would take 20 minutes for people to reach a named alternative by public transport, there should be a public consultation on any proposed jobcentre closure. My constituents in Halfway, Drumsagard or Lightburn would face around a 90-minute walk, or a journey of at least 30 minutes on public transport, to Rutherglen jobcentre. My constituents in Greenlees would face up to a 45-minute journey using public transport.

Frankly, it feels like the latest decision has been made by someone who could not point to Cambuslang on a map, let alone be bothered to look at the building on Google maps, download a bus timetable or google local representatives' names. There has been absolutely no consultation whatsoever with local communities, service users, elected members, trade unions or Department for Work and Pensions employees.

At a meeting of South Lanarkshire Council on 1 October, the SNP group lodged a motion that called on the council to unite in condemning the proposed closure. I am delighted to say that the motion was passed unanimously, with councillors of all political parties and none coming together to stand up for the community.

In 2017, Labour members lined up to condemn the prospect of jobcentre closures, including in Cambuslang. Where are Anas Sarwar and Pauline McNeill today? Where are they when a jobcentre in their region is again under threat?

Back then, our Conservative colleague Annie Wells spoke very honestly about her concerns about the proposed consultation process, or lack

thereof. I appreciate that that must have been a politically uncomfortable position for her to take, given that there was a Tory United Kingdom Government at the time. It is for that reason that I commend one local Labour councillor for speaking up for her constituents in the council chamber and for publicly stating:

"The evidence that the DWP has given for the relocation definitely does not stack up. There is nothing that stacks up that justifies closing the jobcentre."

I am deeply concerned that not one of our Labour colleagues has signed my motion or stayed to listen to the debate. That speaks volumes to my constituents about how much their regional Labour representatives care. It is disgraceful that there has not been a cheep from the Labour MP on the matter, either.

It has been 11 weeks since I wrote to the UK Government to request an urgent meeting and to relate my constituents' concerns. I have yet to receive a substantive reply, let alone a date for a meeting. I ask the minister to write to the DWP to chivvy it along and make it aware that my constituents are so concerned about the closure of Cambuslang jobcentre.

I am not alone. Local Liberal Democrat and Labour councillors have shared that they have not received replies, either. Perhaps Andrew Western, the Parliamentary Under-Secretary of State at the Department for Work and Pensions, who made the announcement in July, has had other important DWP-related matters on his mind. After all, on 15 September, he provided an MP with an answer as to on how many days the union flag had been flown over DWP buildings.

Altogether, the UK Government's behaviour has been nothing short of disgraceful. It has provided a flimsy rationale that does not stand up to any sensible scrutiny. It has not even matched the previous Government's extremely low threshold to trigger consultation. It has flat-out ignored elected members' requests for meetings and further information. In the face of increasing pressure from all sides, it has repeated the same worn-out lines in the local and national press.

I was proud to stand up for Cambuslang jobcentre in 2017, and I am proud to do so today. I am proud of the resolve of the local residents, communities, activists and organisations in my constituency, which I stood alongside in 2017 and which I am standing alongside today.

The motion is about protecting local services and about dignity and respect in relation to how we treat vulnerable groups in our communities. It is about giving my Cambuslang constituents access to a vital service and helping them to access benefits, work and training opportunities. I will continue to campaign for the DWP and the UK

Labour Government to lift the threat of closure of Cambuslang jobcentre and to secure its future.

17:44

Annie Wells (Glasgow) (Con): I thank Clare Haughey for once again bringing this matter to the chamber. She should not have had to do so; it should have been dealt with back in 2017, as she said. I express my concern at the decision to close Cambuslang jobcentre in January 2026, which is a decision made by the DWP under the Labour Government at Westminster.

The closure is more than just an administrative change; it will have real consequences for people in Cambuslang—people who are trying to find work, support their families and rebuild their lives. For many in the community, the jobcentre is not simply a building; it is a vital point of access for advice, training, opportunities and human connection at what can often be one of the most difficult points in someone's life.

By closing this jobcentre, we are asking vulnerable people—people with disabilities, mobility issues or limited means—to travel significantly further, often for more than an hour, as we have heard from Ms Haughey, to reach the next nearest centre in Rutherglen. That is not accessibility; it is exclusion.

As we have heard, the decision was taken without any meaningful consultation with local residents, councillors or community groups, and that lack of transparency is unacceptable. Local voices matter. The people of Cambuslang deserve better than to have decisions made about them, without them.

We have heard all too often that such closures are about efficiency, but there is nothing efficient about forcing people to spend more time and money to access basic support, particularly in the midst of a cost of living crisis. It is also deeply ironic that a Government that claims to promote fairness and opportunity is instead pulling up the ladder for those who need the help most.

Although I acknowledge the need for modernisation, digital tools and online services can never fully replace the face-to-face support that many people need and want. Not everyone has reliable internet access, and not everyone has the competence to navigate the system alone.

Cambuslang has already lost too many local services in recent years. We cannot continue to strip away the very foundations of community support, and then act surprised when people feel abandoned.

I would like to make clear that this is not about party politics. It is, as I said in the debate earlier today, about people. It is about ensuring that those

looking for work are supported locally and are not left behind.

I also call on the UK Government to pause this closure, to properly consult local representatives, service users and employers and to commit to a full equality and accessibility impact assessment before any final decision is made.

Let us listen to the people of Cambuslang, and let us make decisions with communities, not for them. Government at every level should be about helping people move forward and not about putting more barriers in their way.

Once again, I thank my colleague Clare Haughey for bringing this debate to the chamber.

17:48

Rona Mackay (Strathkelvin and Bearsden) (SNP): I thank my friend and colleague Clare Haughey for bringing this important debate to the chamber. It is good to see her standing up for her constituents.

The importance of the debate is clear. Cambuslang jobcentre is the first customer-facing jobcentre to face closure in Scotland. Sadly, if the closure goes ahead, I fear that it might not be the last.

Previously, the Tories threatened closure of several jobcentres in Glasgow. There was no surprise there, to be honest, but I congratulate Annie Wells on standing up against the tide. At that time, MSPs and MPs managed to overturn the decision in cognisance of how damaging it would be at every level. However, I have to admit that I am shocked that it is a Labour Government that proposes this closure. No Labour MSPs signed Clare Haughey's motion, there have been no protests from their MP colleagues and there are no Labour MSPs in the chamber. As Clare Haughey said, that really says it all.

The jobcentres were saved at that time, yet here we are again, now with a Labour Government threatening the closure of a jobcentre. It beggars belief. Labour supported the campaign to save the jobcentres in 2017, but it has been silent now. The level of hypocrisy here is breathtaking.

Only two front-facing jobcentres are under threat of closure at the moment: those in Bristol and Cambuslang. Why is Cambuslang under threat? The DWP says that it is rationalising old estate, but that really does not wash. As we have heard Clare Haughey articulate, Cambuslang jobcentre is in a modern building and is co-located with a general practitioner surgery. It is also a stone's throw from the local citizens advice bureau, and it has the award-winning Routes to Work South, a training provider with more than 20 years of operation under its belt, on its doorstep, so it could

not be more ideally located or fit for purpose, which makes a nonsense of the reasons that have been given by the DWP for its closure.

When the UK Government is looking to move more people off disability benefits into employment, and at a time of record-high unemployment, withdrawing the local support services that could help people into work is ludicrous. Where is the sense in that? However, numerous non-public-facing DWP offices across the UK have closed, which could be the start of a callous cost-cutting measure that will affect people seeking help with accessing benefits, training and, ultimately, employment. When banks are closing on our high streets and post offices are closing, this move seems incredibly callous. I know that it would be a huge blow if the jobcentre in Kirkintilloch in my constituency were to close but, frankly, I now can take nothing for granted.

The UK Government must stop penalising the disadvantaged—people who need support to live a dignified life. It must stop taking services away from them and making their lives even harder.

17:51

The Minister for Business and Employment (Richard Lochhead): I thank Clare Haughey for bringing forward this debate on what is clearly a very important issue, as has been expressed by those members who stayed behind to take part in it.

Many of our ministers in the Scottish Government, including me, share the concerns that Clare Haughey and other members have expressed about the closure of Cambuslang jobcentre, particularly given the lack of consultation with those impacted that has been reported, not least the people who currently access support through the jobcentre.

As members have already said, this is not the first time that the Cambuslang jobcentre has been earmarked for closure, and community campaigns have previously been successful in ensuring that it remains open. I note Clare Haughey's comments about the cross-party support locally in her constituency for retaining the jobcentre, albeit that the Labour Party has not turned up or participated in the debate, which is unfortunate. I suspect that, as others have said, had it been a different Government that was closing the jobcentre, Labour members would have been queueing up to protest and speak in the debate.

The decision certainly risks making it more difficult for people to access the support that the DWP provides and could increase the instances of sanctions as a result of additional travel time to attend jobcentre appointments. That in turn is likely to cause a disproportionate impact on people

who already experience structural barriers to entering and sustaining employment. Travelling further and longer will undoubtedly present more of a challenge to some population groups, not least parents and disabled people. As Annie Wells, Clare Haughey and others have said, the face-to-face contact that some people require more than others is very important and has to be taken into account.

Due to the nature of the devolution settlement, the delivery of employability and social security support straddles both the Scottish and UK Governments. The closure may have an indirect impact on people's access to devolved employability services in South Lanarkshire, and we are therefore disappointed that we were not consulted on the decision. In contrast to the closure, the Scottish Government's approach to devolved employability services recognises the importance of place-based delivery. Through our no one left behind approach, which is delivered in partnership with local government, partners at a local level have flexibility to tailor provision to the needs of service users and local labour markets.

Building meaningful relationships between key workers and people accessing support is seen by the Government as a critical aspect of service delivery. Our approach ensures that in-person provision can be effectively targeted by local partners to areas of need, utilising a range of expertise across the public, third and private sectors.

The Scottish Government has deliberately taken a different approach to devolved services with our policies built around the values of dignity, respect, fairness, equality and continuous improvement. We want those services to be seen as an opportunity, which is why participation remains voluntary.

We have invested £90 million in devolved employability services in 2025-26. The funding ensures that every local authority area in Scotland has an all-age employability offer in place. Our employability investment seeks to balance local flexibility with the assurance that services support the delivery of the Government's missions to support the economy and eradicate child poverty. That is why our budget continues to include specific funding to support parents, for instance, to enter employment and increase their earnings. From 2025-26, there will be specific funding to ensure that every area has an offer of specialist employability support for disabled people.

The commitment to implement specialist employability support is a good example of the Scottish Government working closely with local government to target our activity for significant labour market challenges. Delivery of the specialist employability support has been live in all

local authority areas since 1 July this year. Ministers have seen first hand how Scottish Government funding is being used by the local employability partnership in South Lanarkshire to support the people of Cambuslang into work. My predecessor launched the employability strategic plan in September 2024 and visited the Routes to Work South project, which has supported people into employment in a local cafe. That is one example of the good work that is happening locally. The project also considered how its role in the local community could be leveraged to support those who are furthest from employment and encourages people to engage with the service through a community pantry.

I thank colleagues for bringing the issue to the attention of the Government and highlighting many of the concerns that are being expressed locally. I will take up Clare Haughey's offer to write to UK ministers to indicate the strength of feeling among some parties in the chamber and will note her particular interest in the matter as a local MSP. We will seek a response to her and others' concerns and will probe for more information about the UK Government's intended timescales. We will also ask why there was no consultation, among other issues.

I congratulate Clare Haughey on securing the motion for debate in the chamber and I commend her on her local campaign and support of the local community.

Meeting closed at 17:57.

This is the final edition of the *Official Report* for this meeting. It is part of the Scottish Parliament *Official Report* archive and has been sent for legal deposit.

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