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Wednesday 28 November 2018

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CONTENTS

	Col.
PORTFOLIO QUESTION TIME	1
CULTURE, TOURISM AND EXTERNAL AFFAIRS	1
Glasgow School of Art	1
Tourism (Industrial Heritage Sites)	3
Tourist Attractions (Promotion)	5
Music Sector (International Promotion)	6
Archaeological Projects (Support)	7
Fairtrade Accreditation	8
GOVERNMENT BUSINESS AND CONSTITUTIONAL RELATIONS	9
Brexit (Business Group Views)	9
Brexit (Economic Cost)	11
Brexit (Economic Migration to Scotland)	12
Brexit (Migration Policy)	13
Legislative Consent (United Kingdom Legislation)	14
European Union Withdrawal (Draft Agreement)	15
Brexit (Port Authorities)	16
Constitutional Relations (Scotland and United Kingdom)	17
PUBLIC HEALTH CRISIS (DRUGS AND ALCOHOL)	19
<i>Motion moved—[Miles Briggs].</i>	
<i>Amendment moved—[Joe FitzPatrick].</i>	
<i>Amendment moved—[Monica Lennon].</i>	
Miles Briggs (Lothian) (Con)	19
The Minister for Public Health, Sport and Wellbeing (Joe FitzPatrick)	22
Monica Lennon (Central Scotland) (Lab)	26
Alison Johnstone (Lothian) (Green)	29
Alex Cole-Hamilton (Edinburgh Western) (LD)	32
Liam Kerr (North East Scotland) (Con)	34
Joan McAlpine (South Scotland) (SNP)	37
Neil Findlay (Lothian) (Lab)	40
Michelle Ballantyne (South Scotland) (Con)	43
Fulton MacGregor (Coatbridge and Chryston) (SNP)	45
Annie Wells (Glasgow) (Con)	48
Tom Arthur (Renfrewshire South) (SNP)	51
Jenny Marra (North East Scotland) (Lab)	53
John Mason (Glasgow Shettleston) (SNP)	56
Emma Harper (South Scotland) (SNP)	58
Brian Whittle (South Scotland) (Con)	60
Alex Neil (Airdrie and Shotts) (SNP)	63
David Stewart (Highlands and Islands) (Lab)	65
Joe FitzPatrick	67
Adam Tomkins (Glasgow) (Con)	70
BUSINESS MOTIONS	73
<i>Motions moved—[Graeme Dey]—and agreed to.</i>	
PARLIAMENTARY BUREAU MOTIONS	76
<i>Motions moved—[Graeme Dey].</i>	
DECISION TIME	77
BANK OF SCOTLAND (BRANCH CLOSURES)	82
<i>Motion debated—[Sandra White].</i>	
Sandra White (Glasgow Kelvin) (SNP)	82
Jamie Halcro Johnston (Highlands and Islands) (Con)	85
George Adam (Paisley) (SNP)	87
Monica Lennon (Central Scotland) (Lab)	89

Stewart Stevenson (Banffshire and Buchan Coast) (SNP) 91
Bill Bowman (North East Scotland) (Con) 92
The Minister for Public Finance and Digital Economy (Kate Forbes)..... 94

Scottish Parliament

Wednesday 28 November 2018

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

Portfolio Question Time

Culture, Tourism and External Affairs

Glasgow School of Art

1. **Johann Lamont (Glasgow) (Lab):** To ask the Scottish Government whether it will provide an update on the situation at the Glasgow School of Art. (S5O-02609)

The Minister for Europe, Migration and International Development (Ben Macpherson): Following the tragic fire in June, the Mackintosh building has been stabilised, and residents displaced by the fire have been able to return home. The Scottish Government and Glasgow City Council have provided funding to local residents and businesses in recognition of the significant impact that the fire has had on them. I understand that some local street closures remain in place while further work is completed. Investigations into the cause of the fire are ongoing. Those investigations will be thorough and comprehensive and it will take time to complete that complex task.

Johann Lamont: It is evident that the Glasgow School of Art has cultural, social and economic significance far beyond Glasgow. It is also evident that the fire at the school of art has had a very direct and very serious impact on the local community and local businesses, and I believe that there are significant implications for the economy of Glasgow and the west of Scotland. The challenge goes beyond the city itself.

Is the minister aware whether the Cabinet Secretary for Culture, Tourism and External Affairs, who indicated that she wished to hear directly from businesses about their concerns, has met them and, if so, what the outcomes of those discussions were? If she has not met local businesses and residents, does the minister believe that the cabinet secretary will commit to doing that, to ensure that the Scottish Government's financial response is commensurate with the scale of the challenge that the community and local businesses now face as a consequence of the very serious fire at the GSA?

Ben Macpherson: I thank Johann Lamont for that question and agree with her comments on the significance of the building as an institution and the wider impact of the fire.

The member will be aware that, in July, the Scottish Government announced that it would establish a recovery fund of up to £5 million to assist businesses that had been impacted by the Glasgow fires. To date, Glasgow City Council has paid out more than £2.9 million from that fund to 195 businesses.

With regard to Ms Lamont's request for a meeting, I request that she write to me and the cabinet secretary with details of the businesses that she is in correspondence with, so that we can consider that proposal.

The Presiding Officer (Ken Macintosh): Three members would like to ask supplementaries.

Sandra White (Glasgow Kelvin) (SNP): At the November meeting of Blythswood and Broomielaw community council, concerns were raised about the lack of an update on, and the lack of information pertaining to, the recovery operation and the investigation into the fire at the Glasgow School of Art. Can the minister provide an update on those matters, as the lack of a timescale and the absence of information are having a significant impact on the community and local businesses and, indeed, on the future of the Sauchiehall Street area?

Ben Macpherson: The investigation into the origin, cause and circumstances of the fire is a high priority for the Scottish Fire and Rescue Service and its specialist fire investigation teams. The SFRS is working closely with Police Scotland and the Health and Safety Executive. Significant investigation work has already been concluded. The dangerous condition of the structure significantly restricted site access, including for the SFRS fire investigation teams, but they are now on site and aim to conclude their investigations early in the new year.

I advise Sandra White to follow up any further correspondence with the SFRS and, if there are barriers that prevent her from doing so, to get back to the Government.

Adam Tomkins (Glasgow) (Con): The Glasgow School of Art says that the fire was nothing to do with it because the building was under other people's control at the time that it broke out in June; at the same time, it says that taking decisions about rebuilding the school of art is a question exclusively for it.

As Johann Lamont said in her questions—I completely agree with her—the impact on local businesses, the local community and residents in and around Sauchiehall Street has been massive and continues to be significant. Does the minister agree that decisions about the future of the Glasgow School of Art should be taken not by the school of art alone but in full consultation with local residents and businesses?

Ben Macpherson: As Adam Tomkins stated, whether the Mackintosh building should be rebuilt is a decision for the Glasgow School of Art. As the Mackintosh building is owned by the GSA, which is an independent body, its future is a matter for the GSA board, and the board has made clear its intention to rebuild the Mackintosh as a fully functional art school.

The wider, important point is about engagement with the community and, potentially, there is a question about whether a GSA trust should be established to oversee the rebuild of the Mackintosh building. The Mack belongs to the Glasgow School of Art and decisions about the future of the building rest with the school. We expect the GSA to make governance arrangements that allow the board to give proper attention to the school's core function of delivering high-quality education in that consideration. Adam Tomkins might wish to engage with my colleagues in the education and skills portfolio on the institution's functionality in delivering that.

Claire Baker (Mid Scotland and Fife) (Lab): I noted that the minister mentioned the idea of a trust. Given the significance of the cultural legacy of Charles Rennie Mackintosh to the city of Glasgow, and in the light of two fires having taken place, has the Government considered how the legacy of Charles Rennie Mackintosh in any future building—if the Glasgow School of Art goes ahead with a rebuild as it intends—will be protected for the city and nation, and not just for the art school?

Ben Macpherson: As I said to Adam Tomkins, questions on the trust are for the Glasgow School of Art, because the Mack belongs to the GSA and any decisions on its future rest with the school.

Wider governance questions are of pertinence to how the board takes things forward. I give cognisance to the fact that the issue is currently before the Culture, Tourism, Europe and External Affairs Committee, and I look forward to seeing the outcome of its inquiry. We all have an interest in ensuring that the school fulfils its function as a higher education institution as well as it has done over the decades and, as Claire Baker said, continues to be an important aspect of Scotland's cultural legacy.

Tourism (Industrial Heritage Sites)

2. **Brian Whittle (South Scotland) (Con):** To ask the Scottish Government what action it is taking to boost tourism in rural areas through the promotion of industrial heritage sites. (S5O-02610)

The Minister for Europe, Migration and International Development (Ben Macpherson): Action to promote tourism is a function of VisitScotland that is undertaken in partnership with a wide range of other public bodies that are

directly funded by the Scottish Government. Many of those bodies, including Historic Environment Scotland, the National Museums of Scotland, Museums Galleries Scotland, the national industrial museums and Transport Scotland, contribute to the promotion of our fascinating industrial heritage.

Brian Whittle: The Scottish industrial railway centre in Dunaskin, near Patna, is home to a number of industrial steam and diesel locomotives, including the country's only working fireless locomotive. I am struck by the role that places such as that have in Scotland's industrial heritage. The centre is run entirely by dedicated volunteers and, although it is open only for limited times, attracts a steady stream of visitors. It has big ambitions, including bringing more of its old locomotives into service. What is the Scottish Government doing to support organisations such as the SIRC to grow, allowing more tourists to discover that important part of our industrial heritage?

Ben Macpherson: As I mentioned in my answer to Brian Whittle's first question, Museums Galleries Scotland is the national development body for museums and galleries in Scotland. It is funded by the Scottish Government to support more than 400 accredited institutions around the country, whether by strategic investment, advice or other means. MGS aims to unite the sector and allow the institutions to develop and thrive. To date in 2018, 32 organisations in 17 local authorities have received grant funding totalling more than £100 million. We have also engaged in the go industrial brand of Industrial Museums Scotland, which represents 12 accredited museums and galleries around Scotland.

I am grateful to Brian Whittle for raising the Scottish industrial railway centre. I pay tribute to the work of the Ayrshire Railway Preservation Group and its engagement in the centre. The wider support that I mentioned, for provision through Museums Galleries Scotland, is the appropriate means for such groups to bid for and engage with potential support.

Emma Harper (South Scotland) (SNP): How will Scotland's most iconic rural tourism sites benefit from the first round of the rural tourism infrastructure fund—the RTIF—to help meet the demand from growing visitor numbers to, for example, the Otter pool in bonnie Dumfries and Galloway?

Ben Macpherson: As Ms Hyslop announced on 5 October at Glenfinnan, through our rural tourism infrastructure fund we are funding more than £3 million worth of much-needed infrastructure improvements across 18 projects from Shetland to Dumfries and Galloway, including at the Otter pool. Spread across six local authorities and both

national park authorities, that support will deliver a range of improvements—from camper-van facilities to toilets, parking and pathway improvement—that will benefit both visitors who come to enjoy our stunning scenery and locals alike.

Tourist Attractions (Promotion)

3. Alison Harris (Central Scotland) (Con): To ask the Scottish Government what action it is taking to ensure that all major tourist attractions receive sufficient levels of promotion. (S5O-02611)

The Minister for Europe, Migration and International Development (Ben Macpherson): The Scottish Government supports VisitScotland, Highlands and Islands Enterprise and Scottish Enterprise to promote Scotland as a whole, in order to maximise the economic benefit of tourism to Scotland.

Alison Harris: In February this year, it was revealed that although most of the top 20 tourist attractions in Scotland enjoyed an annual increase in their visitor numbers, the Falkirk wheel was one of two that saw a decrease. I believe that Edinburgh zoo was the other. The number of visitors to the wheel fell by 3.7 per cent, while other attractions that have similar annual numbers had increases of about 25 per cent. Does the minister know why that happened? What reassurances can he give that the Falkirk wheel will receive its fair share of promotion?

Ben Macpherson: Alison Harris will be aware of the initiatives that are taking place in her constituency related to the Kelpies and Scottish Canals in order to boost them and the canal as the remarkable attractions that they are, and to continue their success and broaden their attraction. A new selfie trail that encourages families to get out and discover the genius of the Forth and Clyde canal has been launched between the Falkirk wheel and the Kelpies. It was created by Scottish Canals as part of its “canal encounters” campaign. The wheel2Kelpies selfie trail runs between two of Scotland’s biggest landmarks—the Falkirk wheel and the Kelpies—along Scotland’s oldest canal, which is the Forth and Clyde. I encourage people to support that campaign. The Scottish Government treasures and recognises the importance of those two tourist attractions.

Tavish Scott (Shetland Islands) (LD): The minister might be aware of the Jarlshof archaeological site at the south end of Shetland at Sumburgh. The site is under some pressure from tour buses that are there because of growth in the cruise industry. A car park for coaches and toilet facilities are needed at the site. I have been seeking to broker a meeting with Historic Environment Scotland and all the relevant parties.

Would the minister undertake to make that happen through his good offices? There is a desperate need for the facilities, but we have not been able to confirm a date with Historic Environment Scotland, which is the only organisation that we need to make the meeting happen.

Ben Macpherson: Tavish Scott will understand that it would not be appropriate for Government ministers to engage in operational matters. However, if he will write to me with further details, we can consider how we can assist him in securing the meeting.

Music Sector (International Promotion)

4. Tom Arthur (Renfrewshire South) (SNP): I refer members to my entry in the register of members’ interests and membership of the Musicians’ Union.

To ask the Scottish Government how it supports the promotion of the Scottish music sector internationally. (S5O-02612)

The Minister for Europe, Migration and International Development (Ben Macpherson): We fund Creative Scotland to support musicians across all genres of music. Since 2008, we have invested more than £21 million in the festivals expo fund, which is providing a global platform for Scottish musicians and other artists, and opening up opportunities for onward touring. In addition, the platform for creative excellence—PLACE—fund, which will provide £15 million over the next five years, will help the Edinburgh festivals to develop their international work.

We invest £350,000 annually to support the national performing companies, through the international touring fund, to tour internationally, and our programme for government commitments include an international creative ambition programme that is to be launched by May 2019.

Tom Arthur: I thank the minister for that detailed answer. As he might be aware, I am convener of the cross-party group on music, and at every meeting that we have had since the group was established a key concern of members representing a range of stakeholders across music in Scotland has been the threat that is posed by Brexit. The withdrawal agreement makes it absolutely clear that the overriding priority of the United Kingdom Government is to end freedom of movement, which would be devastating for our music sector in Scotland. Does the minister agree that any member of the UK Parliament and, for that matter, of the Scottish Parliament, who backs the withdrawal agreement is no friend of musicians in Scotland?

Ben Macpherson: Tom Arthur is absolutely right to point out that there is a distinct danger that removal of access to freedom of movement would

result in additional bureaucracy and border checks on touring artists, and would be diminishing the whole UK's and Scotland's music industry. Indeed, in UK Music's recent survey on the economic impact on the music industry, half the respondents thought that Brexit would have a negative impact on the industry, compared with only 2 per cent who thought that it would be positive.

Rachael Hamilton (Ettrick, Roxburgh and Berwickshire) (Con): The opportunity for Scottish young people to tour internationally is hugely important, and not only promotes Scottish music but enriches their lives. However, cuts to music tuition in schools because of the Scottish Government are failing Scottish pupils and leading to lower levels of music uptake. Does the minister believe that that will help or hinder promotion of the Scottish music sector abroad?

Ben Macpherson: Rachael Hamilton will have noted from my first answer the support that the Scottish Government gives to our music industry. With regard to the proportion of music funding that is available for education, she would better direct the question to the Deputy First Minister and Cabinet Secretary for Education and Skills.

Archaeological Projects (Support)

5. **Gail Ross (Caithness, Sutherland and Ross) (SNP):** To ask the Scottish Government what help and support it offers to archaeological projects. (S5O-02613)

The Minister for Europe, Migration and International Development (Ben Macpherson): I and the Scottish Government recognise the importance of our historical environment and the wealth of historical structures across the country. Many are at the heart of the communities that have worked hardest to secure their future.

Scottish Government funding for archaeology is channelled via Historic Environment Scotland grant schemes. Despite recent financial constraints, we have maintained Historic Environment Scotland external grants at £14.5 million per year, with £4.1 million being allocated for archaeology. A great deal of information about the schemes is available on the Historic Environment Scotland website, and staff offer potential applicants comprehensive pre-application advice, and support and advice through to completion.

Gail Ross: Caithness Broch Project in my constituency is doing some fantastic work in bringing the county's broch history to life. At this point, I would like to draw members' attention to my entry in the register of members' interests, as a patron of the organisation. It plans to build a full-size broch and is undertaking various projects with schools and in the community. Will the minister or

the Cabinet Secretary for Culture, Tourism and External Affairs agree to meet representatives of Caithness Broch Project to hear about all the work that it is currently doing and its plans for the future?

Ben Macpherson: I am aware of Caithness Broch Project and am particularly impressed by its efforts to use and engage with local communities, particularly children. The Scottish Government appreciates the work that is being undertaken by the project to promote Caithness's rich archaeological history, and its proposal to build a full-scale broch as a visitor attraction. Engagement in a project of this nature is best undertaken as an operational issue with Historic Environment Scotland, Highlands and Islands Enterprise, other Government agencies and the local council, at this stage in the development of the proposals, so it would not be appropriate for ministers to be involved.

However, if we can be of assistance in encouraging and facilitating such engagement, I would be happy to consider that. I wish Gail Ross and the project well in their on-going endeavours.

Fairtrade Accreditation

6. **Alex Cole-Hamilton (Edinburgh Western) (LD):** To ask the Scottish Government how it supports communities in achieving Fairtrade accreditation. (S5O-02614)

The Minister for Europe, Migration and International Development (Ben Macpherson): The Scottish Government has provided £1.6 million in core funding to the Scottish Fair Trade Forum since its inception in 2007, to take forward our policy on fair trade. That includes having realised 2013 our ambition to achieve fair trade nation status, which was reconfirmed in 2017, and demonstrating Scotland's on-going progress in supporting and purchasing fair trade.

Scotland currently has 97 Fairtrade communities, including all its cities and 27 of the 32 local authority areas. With our support, the forum continues to support active fair trade groups through the accreditation process in villages, towns and cities up and down the country.

Alex Cole-Hamilton: Queensferry fair trade group worked very hard to achieve Fairtrade accreditation for the town of South Queensferry. The town got that accreditation in January this year and was, understandably, very keen to demonstrate it by erecting signage at the town's markers, only to discover that Transport Scotland has a fast policy to stop communities from erecting such signage because Fairtrade is a commercial brand. Does the minister agree that that is a miserly decision that is in danger of disincentivising towns' achieving Fairtrade status?

Ben Macpherson: I thank Alex Cole-Hamilton for raising that point. I am aware of the Queensferry fair trade group and I congratulate it on its work in achieving Fairtrade royal burgh status. I am aware that Alex Cole-Hamilton has previously asked parliamentary questions about the matter, and that he corresponded with the then transport minister, Humza Yousaf. I offer him a meeting with me and, potentially, the Scottish Fair Trade Forum following this meeting to discuss the matter in more detail.

Government Business and Constitutional Relations

The Presiding Officer: Question 1 has been withdrawn.

Brexit (Business Group Views)

2. Liam Kerr (North East Scotland) (Con): To ask the Scottish Government what assessment it has made of the views of business groups regarding its position on Brexit and wider constitutional affairs. (S5O-02620)

The Cabinet Secretary for Government Business and Constitutional Relations (Michael Russell): The Scottish Government—
[*Interruption.*]

Alex Neil (Airdrie and Shotts) (SNP): Card!

Michael Russell: The old mistakes are the best ones. I shall start again, Presiding Officer, now that my microphone is on. As Professor Tomkins pointed out, even debaters of the year can get their debating skills wrong.

The Scottish Government's position on Brexit and the economy was, and is now, framed by the joint statement issued on 7 July 2016 by the Scottish Chambers of Commerce, the Federation of Small Businesses, Scottish Financial Enterprise, the Scottish Council for Development and Industry, the Confederation of British Industry and the Institute of Directors.

When the Cabinet Secretary for Finance, Economy and Fair Work last met those organisations to discuss Brexit, in September, their focus remained on trade, free movement and the support and clarity that businesses need to plan, invest and grow.

I have spoken to several of those organisations in recent weeks about the current situation and the deal that the United Kingdom Government has agreed with the European Union, which we regard as worse than the current position within the EU. It provides for the UK, and Scotland within it, to leave the single market, which would damage Scotland's economy, jobs and living standards.

Liam Kerr: On that point, I want to press the minister on something that he said last week, which is that the current withdrawal agreement is better than no deal. Can he therefore, here and now, confirm unequivocally that, if and when it comes to it, the Scottish National Party will confront reality and vote to avoid no deal?

Michael Russell: The member's version of reality is, as ever, an unusual one. The reality of this situation is that there is no need to make that choice. The House of Commons can and, I am sure, will rule out a no-deal scenario. Certainly, the deal that has been offered by the Prime Minister is a very bad deal indeed, and it needs to be rejected because of the damage that it would do to Scotland and to the member's region, which he should recognise. The region that the member represents would be particularly hard hit by the deal, and there would be severe economic damage to the businesses and business organisations that he mentioned in his question. It would be far better if he faced the reality of Brexit instead of whistling in the wind.

Annabelle Ewing (Cowdenbeath) (SNP): Given that we are talking about the views of business groups, does the cabinet secretary agree that it is instructive that the CBI's head of EU negotiations suggested in an email that there is

"no need to give credit to the negotiators ... I think, because it's not a good deal"?

Michael Russell: There is no doubt that it is not a good deal. It is also not the only deal. For the Prime Minister to present it as being the only option is completely and utterly wrong. The deal is as it is because of the red lines that the Prime Minister set herself at the start of the negotiations. She set those red lines to try to keep together a fractious Tory party and paper over the 40-year civil war. What has come out of the process is exactly what was expected when those red lines went into the process.

We should draw attention to Scotland's uniquely difficult situation in relation to freedom of movement. Freedom of movement is essential to the Scottish economy. Without freedom of movement, there will be a substantial decline in economic performance and a substantial shortage of labour, particularly in rural areas. That is already becoming apparent.

Those are the realities of this question, and we should say that loud and clear. We should say to businesses that we understand that they want this situation to be over—we all want it to be over. However, the Conservatives started it, and they are making an incredible mess of it.

Brexit (Economic Cost)

3. Daniel Johnson (Edinburgh Southern) (Lab): To ask the Scottish Government what impact assessment it has undertaken regarding the potential economic cost to Scotland of additional customs arrangements and border regulations resulting from Brexit. (S5O-02621)

The Cabinet Secretary for Government Business and Constitutional Relations (Michael Russell): Scottish Government analysis, which was published earlier this year in “Scotland’s Place in Europe: People, Jobs and Investment”, assessed the implications for Scotland’s economy if the United Kingdom exited the European Union. The modelling used a range of Brexit shocks, including estimates of the trade costs that are associated with customs arrangements and border regulations. Results from the analysis indicate that a scenario in which the UK pursued a free trade agreement could lead to a loss of up to 6.1 per cent of gross domestic product—£9 billion in 2016 terms—in Scotland by 2030. That is equivalent to £1,600 per person in Scotland. Likewise, a hard Brexit could lead to a loss of up to 8.5 per cent of GDP—£12.7 billion in 2016 terms—in Scotland by 2030. That is equivalent to £2,300 per individual.

Daniel Johnson: I agree with much of the cabinet secretary’s analysis. It has become clear that the costs of Brexit will come from additional customs arrangements and market regulations that do not currently exist. However, surely those arrangements and regulations would exist if there was a differential deal between different parts of the United Kingdom. Could the economic assessment that the cabinet secretary has given in relation to Brexit and Scotland’s trade with the rest of Europe also apply to any differential deal within the UK?

Michael Russell: Considerable issues would arise out of differentiation. Such issues reflect the advantages that areas with a differentiated outcome would have. In Northern Ireland, there is a very strong view that there would be considerable advantages. For example, in relation to inward investment, investing in Northern Ireland would give access to the single market.

There are issues to be addressed. In presenting the paper “Scotland’s Place in Europe: An Assessment of The UK Government’s Proposed Future Relationship with The EU”, the First Minister indicated that further work needs to be done to quantify the advantages. However, those advantages clearly would exist.

I note that the figures that I have given are broadly borne out by the figures that the UK Government has published today and by the Chancellor of the Exchequer’s admission that

every Brexit scenario will make people and the country worse off. Nobody would have thought that it was the Chancellor of the Exchequer’s job to bring forward policies that would make people poorer.

Brexit (Economic Migration to Scotland)

4. Alex Rowley (Mid Scotland and Fife) (Lab): To ask the Scottish Government what discussions it has had with the United Kingdom Government regarding the UK’s exit from the European Union to ensure that Scotland is promoted as a destination for economic migration. (S5O-02622)

The Minister for Europe, Migration and International Development (Ben Macpherson): Migration is crucial to the development of Scotland as a thriving nation. I recently met the UK Minister of State for Immigration and, again, sought her commitment to meaningful engagement, given the profound impact that migration has on Scotland’s economy, public services and demography.

We submitted compelling evidence to the Migration Advisory Committee. Disappointingly, the proposals that the Prime Minister’s Cabinet has accepted ignore sectors that are integral to Scotland. The UK Government’s discredited hostile environment policies damage our ability to attract the people whom we need, and recommendations in the MAC’s recent reports would harm our prosperity. That is why the Scottish Government will continue to argue for a tailored and more flexible migration system that meets our distinct needs.

Alex Rowley: What progress has the Scottish Government made in making the case that Scotland has a specific need for more powers over migration and immigration policies to be devolved to Scotland? Does the minister agree that the Government needs to do more work to promote the benefits of migration to the wider Scottish public?

Ben Macpherson: With the aim of achieving more devolution of powers to build a more flexible and tailored migration system, I and the rest of the Government are working constantly with stakeholders, who are raising with us concerns about the MAC’s recommendations, the effect of Brexit and the hostile environment policy. We are going through a constructive awareness-raising process with business and other stakeholders on the opportunity to devolve powers so that we can do things differently here in Scotland. By “devolution of powers”, I mean the devolution of powers in the current UK system in order to build flexibility and deliver on our needs.

On raising awareness, absolutely all of us in the chamber have a responsibility to champion the positive benefits of migration, especially in the

current environment and given the absolutely awful things that are being said, such as the reference to EU nationals skipping the queue that the Prime Minister recently made. Those are shocking remarks. I point the member to the Scottish Government's we are Scotland campaign. It has been very successful in highlighting and championing the positive benefits of migration, which we should all celebrate.

Brexit (Migration Policy)

5. **Linda Fabiani (East Kilbride) (SNP):** To ask the Scottish Government what involvement it currently has with the United Kingdom Government's Migration Advisory Committee in relation to advice on migration policy post Brexit. (S5O-02623)

The Minister for Europe, Migration and International Development (Ben Macpherson): The Scottish Government has made it clear to the UK Government and the Migration Advisory Committee that Scotland's needs in relation to migration policy are distinct and significant. The Scottish Government also provided a detailed response to each of the MAC's calls for evidence, but that evidence has largely been ignored.

We have highlighted to the UK Government that the MAC's recommendations in its reports are disappointing to employers, local authorities, third sector organisations and universities across Scotland. The Scottish Government has met and heard evidence from a range of stakeholders to discuss the impact of the MAC's recommendations and to hear their concerns. The Scottish Government shares those concerns, and we are committed to listening to and promoting the interests of individuals and organisations across Scotland. I have personally met Professor Alan Manning, the chair of the MAC, and the UK immigration minister to discuss Scotland's needs, and I have reiterated our concerns in relation to the MAC's recommendations.

Linda Fabiani: I am pleased that the minister mentioned Professor Manning, the chair of the Migration Advisory Committee. Is he aware that, when Professor Manning gave evidence to a committee of this Parliament earlier this month, he admitted that no specific modelling regarding the situation in Scotland in relation to migration had ever been done? There is now a consultation on the shortage occupation list, in which Scotland has very specific interests. What strong and firm representations are being made with regard to those interests?

Ben Macpherson: Linda Fabiani is right to say that the MAC report took little cognisance of Scotland, with only page 123 and a little bit of page 124 being allocated to it.

The member is also right to ask about our engagement with the MAC and, indeed, the UK Government on the shortage occupation list. In August—and again this week, when I met her for a second time—the UK Minister for Immigration gave me an undertaking that Scottish interests and Scottish Government input with regard to the shortage occupation list would be respected and constructively considered. The Scottish Government will, of course, respond robustly to the MAC's call for evidence in its consultation on the Scottish shortage occupation list.

Legislative Consent (United Kingdom Legislation)

6. **Gordon Lindhurst (Lothian) (Con):** To ask the Scottish Government whether it plans to meet its commitment in its programme for government to oppose legislative consent to all United Kingdom legislation relating to European Union withdrawal. (S5O-02624)

The Cabinet Secretary for Government Business and Constitutional Relations (Michael Russell): The Scottish Government remains committed to working with the UK Government to ensure a functioning statute book in the event of EU exit. We are working closely together on the secondary legislation programme required and are in active discussions about primary legislation, for example on the Agriculture Bill, the Fisheries Bill and the Healthcare (International Arrangements) Bill. Our position on EU exit notwithstanding, the Scottish Government is not therefore opposed to legislative consent to UK legislation relating to Brexit.

However, in relation to the European Union (Withdrawal) Bill, the UK Government made it clear that it intended to proceed regardless of the fact that this Parliament did not consent to the bill. I have pressed the UK Government to make it clear whether it intends to proceed without the Parliament's consent to such legislation in the future. Until and unless we can be assured that the decisions of the Parliament will be respected, we will not lodge any legislative consent motions on Brexit-related provisions, except in the most exceptional of circumstances.

It is of course important that the Parliament can scrutinise Brexit-related legislation. We are lodging legislative consent memoranda in line with standing orders, setting out our views on the substance of the UK proposals, and we will of course contribute fully to committee consideration and ensure that the Parliament is able to express its views on Brexit-related provisions in UK bills.

Gordon Lindhurst: Last week, the cabinet secretary gave my colleague, Adam Tomkins, an assurance that he would speak to the relevant minister with regard to legislative consent to the

Healthcare (International Arrangements) Bill, which is literally a vital bill. Can he confirm whether that meeting has taken place?

Michael Russell: I have spoken to the relevant cabinet secretary and I am studying the bill and its implications to see whether it would be possible or necessary for us to make an exception. I do not yet know the position, and I will not know it until we are closer to the passage of the bill. We were given virtually no notice of the bill—it was a matter of hours—so the practice of the UK Government has not made the situation easier.

However, there is an easier way to take the issue forward, which would be for David Lidington—who will be in this building tomorrow—to accept the offer that we have made on changes to the legislative consent process that would ensure that it could be relied on as an arrangement between two Parliaments that was respected. If Gordon Lindhurst were to bring his good offices to bear—should he have any influence over members of the UK Cabinet—we could resolve the matter very quickly in those circumstances.

European Union Withdrawal (Draft Agreement)

7. Dr Alasdair Allan (Na h-Eileanan an Iar) (SNP): To ask the Scottish Government to what extent the United Kingdom Government has consulted with it regarding the draft agreement on the withdrawal of the UK from the European Union. (S50-02625)

The Minister for Parliamentary Business and Veterans (Graeme Dey): Devolved Administrations did not see the draft agreement before it was published on 14 November, despite a joint ministerial committee having taken place the evening before.

Throughout the Brexit process, the UK Government has not engaged the Scottish Government in any meaningful way, and there has been little or no opportunity to scrutinise—let alone make any changes to—agreements that will have a major impact on Scotland and devolved responsibilities. Any reasonable person would consider that to be completely unacceptable.

Dr Allan: Over much of the past couple of years, I sat on joint ministerial committees with the UK Government, and I know that the minister has taken part in ministerial forums with the UK Government. Given what the minister said, is it his impression that those committees, in their current form, allow Scotland to input meaningfully into the UK's decisions on Brexit?

Graeme Dey: It is no secret that we have been frustrated by the quality of engagement with the UK Government. We have been disappointed that the discussions of the joint ministerial committee

that the Cabinet Secretary for Government Business and Constitutional Relations attends have fallen short of the committee's original aim. Similar frustrations exist with regard to the joint ministerial forum, despite the best intentions of this Government and our Welsh colleagues.

Engagement in both has fallen far short of the Prime Minister's commitment to the full involvement of the devolved Administrations. The UK Government has not meaningfully engaged with the devolved Administrations to agree the details of negotiating positions and to ensure that Scotland's interests are protected in workable proposals.

It cannot be right that decisions on the future relationship with the EU have been taken without due regard for consultation across the four Governments of the UK. We need to see a dramatic change in attitude and practice.

Brexit (Port Authorities)

8. Stuart McMillan (Greenock and Inverclyde) (SNP): To ask the Scottish Government what engagement the Cabinet Secretary for Government Business and Constitutional Relations has undertaken with port authorities regarding the implications of Brexit. (S50-02626)

The Cabinet Secretary for Government Business and Constitutional Relations (Michael Russell): Along with ministerial colleagues, I have visited a number of ports to understand their interests as well as their concerns about leaving the European Union. I have also met with the British Ports Association, which represents most ports in Scotland, the UK Chamber of Shipping and the United Kingdom Major Ports Group.

Stuart McMillan: The cabinet secretary will be aware that my constituency is home to the Greenock ocean terminal, one of Scotland's busiest ports. Given that, in addition to the normal port activity that takes place there, more than 90 cruise ships are already booked for the port of Greenock next year, can he confirm that the Scottish Government is working to ensure that Brexit does not affect the cruise ship market and the tourism boost that it provides to my constituency and its local economy?

Michael Russell: In so far as we can ensure such a thing, we would endeavour to do so. The cruise ship market is an important and growing market; it is of great importance in my Argyll and Bute constituency.

The cruise ship market depends not just on ports but on sentiment. It depends on people wishing to visit Scotland and coming here. We hope that people will continue to wish to visit Scotland. It is important that Scotland is seen as a

welcoming place. However, Brexit has not been a welcoming activity; it has been an activity that has said to the rest of the world that the UK is not necessarily a warm and inviting place. I hope that we can overcome that, and the best way to do so would be to remain in the EU.

Constitutional Relations (Scotland and United Kingdom)

9. Bill Bowman (North East Scotland) (Con): To ask the Scottish Government what its position is on the implications of the draft withdrawal agreement between the United Kingdom and the European Union for constitutional relations between the Scottish and UK Governments. (S5O-02627)

The Cabinet Secretary for Government Business and Constitutional Relations (Michael Russell): The main lesson for constitutional relations from the whole Brexit process, and now the withdrawal agreement and the political declaration, is that the United Kingdom Government will ignore the views of the people of Scotland as expressed in both the European Union referendum and in the Scottish Parliament. The UK Government has consistently rejected any possibility of a closer and different relationship for Scotland with the EU while seeking—rightly and properly—such a relationship for Northern Ireland. The views of the people, Parliament and Government of Scotland have not been reflected or respected in the UK Government’s objectives or in its approach to the negotiations. That calls into question any claim that the UK is a partnership of nations or any claim of respect for Scotland within the union.

Bill Bowman: The cabinet secretary has said that there would be a second Scottish referendum if the Prime Minister’s deal were passed. Pete Wishart has said that there would be one if there were no deal, and Ian Blackford has said that there would be one if single market and customs union membership were ruled out, such membership being something that the cabinet secretary once said is

“clearly not going to happen”.

Is there any situation in which the Scottish Government will do the right thing by the Scottish people and businesses and end its referendum obsession? *[Interruption.]*

Michael Russell: That has animated Tory members like nothing else this afternoon. They might like to reflect on why we are in this difficulty at present, why we are facing the economic calamity that we face, and why we are facing the dislocations that we face. The answer to those questions is the Conservatives, their 40-year-long civil war in Europe and their referendum. Indeed, it

is the Conservatives who should withdraw their obsession with the referendum, because it is the referendum that got them into this mess.

I am glad that Mr Bowman is such a close student of everything that Pete Wishart, Ian Blackford and I say. Actually, he misquoted all of us, but I forgive him because I know that it is difficult to listen to such careful and thoughtful arguments and make sense of them all. Therefore, I will put it very simply to him: I believe in democracy and the people of Scotland. *[Interruption.]* There are the howls of the anti-democrats who have got us into the position that we are in. The reality is that I am a democrat. I believe that, at the end of the day, the people of Scotland will have—*[Interruption.]* I will not be shouted down in the chamber or anywhere else, and Scotland will not be shouted down by the Tories in any way.

When the moment comes, the people of Scotland will have the right to choose between the Brexit that is being foisted on them—*[Interruption.]* The Tories can shout at Scotland all they like. The engagement that those Tories are having with Scotland today is considerably greater than the engagement that their Prime Minister will have when she skulks and hides away from the people of Scotland in Glasgow.

As far as the Scottish Government is concerned, we will give the people of Scotland the right to choose because they deserve that right. They do not deserve to be dragged out of Europe against their will. *[Applause.]*

The Presiding Officer: On that note, we end portfolio questions.

Public Health Crisis (Drugs and Alcohol)

The Deputy Presiding Officer (Linda Fabiani): The next item of business is a debate on motion S5M-14914, in the name of Miles Briggs, on a new approach needed to tackle Scotland's drugs crisis. I call Miles Briggs to speak to and move the motion.

14:44

Miles Briggs (Lothian) (Con): Ten years ago, pressure from the Scottish Conservatives resulted in the then First Minister, Alex Salmond, committing the minority Scottish National Party Government to develop a 10-year drugs recovery strategy. At the time, the Scottish Conservative leader, Annabel Goldie, rightly called for a new focus on rehabilitation services and action to address the shocking death rate among drug-dependent Scots. In 2007, that saw the unacceptable situation of 455 of our fellow Scots dying from drug-related deaths. A decade later, we need to be totally honest about what has gone on: the SNP Government has failed to lead the change that we all wanted to see. The road to recovery strategy has not—

Neil Findlay (Lothian) (Lab): Given that the member's party had such an influence on that policy, is it his party's influence that has caused the number of drug deaths to double?

Miles Briggs: No. In Mr Findlay's contribution to these debates, he should maybe consider the issue that we are talking about and the fact that we are trying to progress this policy, which is exactly what the Scottish Conservative MSPs did. I remember that at the time Labour MSPs—or what was left of Labour who returned to the Parliament—did nothing on the issue, so we will take no lectures on it today.

The Scottish Government's draft strategy estimates that 61,500 people between the ages of 15 and 64 are engaged in problematic drug use in Scotland today. That number has significantly increased from the estimated 52,000 Scots who needed help in 2007, as stated in "The Road to Recovery" strategy document. A decade ago, Scottish Conservatives asked SNP ministers to act; today, we are demanding that SNP ministers take action. Scotland is facing a national public health emergency, with a record number of drug-related deaths.

Last year, 934 of our fellow Scots died as a direct result of overdoses, which is more than double the number a decade ago and two and a half times the rate United Kingdom-wide.

Stuart McMillan (Greenock and Inverclyde) (SNP): I refer members to my entry in the register of interests. Is Miles Briggs now saying that he and his party did not agree with the road to recovery strategy?

Miles Briggs: That is exactly what I am not saying. I am saying that what we hoped would be a strategy that the Government would deliver to turn the situation round has failed. Ministers have failed and today we seek to reset the strategy to ensure that the whole Parliament takes up and addresses the challenge.

Scotland is looking to its Parliament and the Government to act, and we need action now. The human cost of drug misuse is immense: drugs wreck families, destroy lives and are holding back some of our poorest communities. The financial cost is just as severe, as it has been estimated that drug misuse costs Scotland £3.5 billion every year. Scottish Conservatives are therefore calling today for a new approach. We have consistently called on the Scottish Government to take a genuine cross-portfolio approach to drug addiction in Scotland. That is why we have set out our own radical proposals this week on how we believe that we as a country can reduce drug addiction and cut drug-related deaths.

We want to see steps taken to establish new, innovative approaches in Scotland to support individuals, families and communities: the establishment of local commissions for individuals caught for the first time in possession of drugs; an independent review of the methadone programme; a redesign of alcohol and drug services; the redirection of funds into rehabilitation, recovery and abstinence support; more prison-based interventions, followed by transitional and long-term support for addicts; increased peer support, employability and education programmes; and a third sector-led recovery task force.

We are also calling on the SNP Government to commit to real targets to benchmark drug policies—something that was not included in the previous strategy. There are targets that we believe are achievable through a change in policy direction from the Government: a target to halve the number of drug deaths in five years and a target to increase the number of problem drug users accessing treatment from just 40 per cent to 60 per cent. If we listen to those who work day in and day out in our drug and alcohol partnerships, it is clear that they feel let down by the Scottish Government and that its drug and alcohol strategy is simply not fit for purpose.

The Minister for Mental Health (Clare Haughey): Will the member take an intervention?

Miles Briggs: I want to make some progress in the time that I have.

Scottish Conservatives agree with those workers' view. Many feel that the Scottish Government lacks a real vision to get a grip on the crisis that our country faces, which is costing lives, destroying families and affecting so many of our communities. It is too big and too important an issue simply to be left to the SNP Government.

The SNP Government has decided to publish its drug and alcohol strategy today—the very day that we are debating the issue in the chamber. I have read the strategy, and my initial thoughts are that it has not developed the actions that the sector has been calling for and that it is not going to make the real long-term difference that we all want to see. As with the positive steps that were taken to improve the suicide strategy, the Scottish Conservatives have offered to work with the Scottish Government on the drug and alcohol strategy. I met the Minister for Public Health, Sport and Wellbeing on his very first day in the job and outlined how we wanted to see a radical new approach—something that has not materialised.

This Government has not prioritised the public health emergency that we have in Scotland today and it has not looked towards the long-term solutions that we all should work to develop. Most recently, the SNP Government has destabilised the sector with a £20 million cut to the funding for alcohol and drug partnerships. The third sector is simply not being let in or being given the opportunity to set up the help and support for drug addicts and their families and communities. It is not being given the opportunity to provide the additional infrastructure that the country so desperately needs.

The situation in Scotland today is at crisis point. There are also warnings from the international situation—the opioid crisis in the United States is a major warning and a call to action for all parliamentarians across the chamber.

A year ago, Alison Johnstone and I visited the Edinburgh alcohol and drug partnership facility and met a number of service users there. It is a visit that will stick with me for the rest of my time in this Parliament. We met an individual who had spent 20 years in drug and alcohol services. She felt that she was moved around those services and was not given the opportunity to escape what she saw as a cycle of decline. She told us her personal story. When she was six years old, she was abused by her father, and at the age of 13, he introduced her to heroin, which destroyed her life. What stuck with me was that she felt that it was somehow her fault. However, what she really wanted to say and what I want to say today is that, for her, the opportunity to get into recovery services just did not exist here in Edinburgh. That opportunity does not exist across Scotland, and that has to change.

The current strategy and the Government's new strategy do very little to achieve that change. I do not want to be standing here in 10 years' time, taking part in a debate on how to address the thousands of drug deaths that we will see in Scotland if there is no change.

It should be a national scandal that under the SNP, Scotland has become Europe's drug death capital. Over the past 20 years of devolution, Scotland has failed to make any real progress in addressing the drug dependency and drug misuse issues that many of our fellow Scots face.

We as parliamentarians can decide to spend our time blaming other Parliaments, looking for excuses and looking for policy areas which are not within our powers—or we can act.

We on the Conservative benches are not willing to see this national public health emergency continue. We need action to challenge our country, our health services, the third sector and local communities to help to turn this situation around. We can come together and work together to develop the new national approach that is clearly needed to tackle the public health emergency that so many of our fellow Scots are facing. However, we need the SNP Government to understand that a radical new approach is needed to tackle this crisis. The Scottish Government can and must lead that change, or make way for others to do so.

I move,

That the Parliament recognises the drug-related public health crisis; understands that the number of people engaged in problematic use of opiates and/or benzodiazepines has increased since 2007, with 934 fatalities recorded in 2017, and that Scotland now has the highest drug death rate in Europe; considers that the Scottish Government's draft drug and alcohol strategy, All Together Now, is not fit for purpose, and that it will not deliver the additional capacity or intervention needed to reduce Scotland's damaging drug and alcohol levels, and recognises that a new approach is needed to tackle this crisis.

14:53

The Minister for Public Health, Sport and Wellbeing (Joe FitzPatrick): The past 10 years have seen significant changes in the nature of Scotland's alcohol and drug problems. We have witnessed a significant increase in the number of drug-related deaths and correspondingly high levels of alcohol-related deaths.

Alongside that loss of life, problem substance use also inflicts pain, trauma and suffering on individuals, families and communities right across the country. I came into this post at a time when work was already under way to develop a new substance use strategy. However, I took the decision at that point to pause what was being

produced, which allowed me time to meet people from the sector, including those who are responsible for commissioning and delivering our treatment services as well as some of those who have used and still use those services, and their families.

Just this morning, I announced the publication of our new combined alcohol and drugs strategy, "Rights, Respect and Recovery", at the Cairn centre in Dundee. I had the opportunity to meet the service users at the centre, who spoke to me about their experiences, which included their use of substances, and their stories of recovery. I also spoke to many family members, and I was able to speak to some of the staff who work there to get a feeling for what it is like to be at the front line of service delivery.

I was also very pleased to be able to take a very short training course that has allowed me to dispense naloxone. It took five minutes. I encourage anyone who has not taken that course to get in touch with one of the services. It is one of the groundbreaking things that we do here in Scotland, and we lead on it internationally. It saves lives, and we can all be part of that. It took literally five minutes to get the training. I thank the staff who gave me that training this morning.

In the development of the strategy, I was very keen to speak to as many different groups and individuals as possible to ensure that I understood not only where the differing points of view come from, but the reasons behind them. In addition, we undertook an engagement process around the document and we received over 140 responses.

I learned during that work that the field of substance use is not one that is easy to navigate and that there are opposing views on a number of points. However, from the conversations that I have had and the feedback that has been received so far, I feel that what we have published today is a strategy that has the support of the whole sector. I have looked at the feedback so far today, and it certainly seems to be the case that there is overwhelming support for the strategy.

We all want to see a reduction in the levels of harm that are associated with alcohol and drug use, and our new strategy sets out how we propose to achieve that. Importantly, it recognises the significant increase in drug-related deaths and the corresponding high levels of alcohol-related deaths, and it sets out a range of options that will work to reduce them.

We know that being engaged with services is a protective factor and that it is one of the most effective ways of keeping people alive.

Alex Cole-Hamilton (Edinburgh Western) (LD): Does the minister accept that his Government's cut of 23 per cent to alcohol and

drug partnerships between 2015 and 2017 will have played some role in our poor performance in terms of drug mortality statistics? Does he recognise the loss of institutional memory from organisations that folded or lost staff in that time, which is going to be very hard to recoup?

Joe FitzPatrick: No. I do not recognise the figures. That is not what happened. There was a different way of funding services. What I recognise is the £20 million of extra funding that we have put into services.

Our strategy sets out how we will improve the reach, attractiveness and speed of delivery of treatment services. We will also deliver and maintain the best possible treatment and recovery services that can respond to the changing patterns of substance use and associated harms in Scotland.

Miles Briggs: Will the minister take an intervention?

Joe FitzPatrick: I am sorry. I need to make progress.

The strategy describes how we will utilise the new investment of £20 million per annum in the current session of Parliament, which I have just mentioned, to put health and person-centred services at the heart of our approach. It also covers how we will work in partnership with stakeholders, service providers and those with lived and living experience. With those partners, we will agree a new memorandum of understanding to deliver on the agreed strategic outcomes in the strategy, but also to guide our new investment.

There is a challenge in the strategy for our treatment services. We are asking them to consider how they can adapt to ensure that they can find those individuals who are most in need of help and support and deliver services that address their specific circumstances.

Neil Findlay: I have been listening to all that the minister has said. Given what he has said so far, what does he say to my constituent who came to see me last week, who wants treatment for heroin addiction and has been told that there is a three to four-month wait to see anyone?

Joe FitzPatrick: Waiting times are certainly improving across Scotland, but that is exactly what the strategy is about. It is about how we provide those services to people and do it better.

The strategy recognises that some of the approaches that are currently in use do not go far enough in terms of harm reduction, and it confirms our support for health-focused, evidence-based approaches such as safer drug consumption facilities. We will continue to press the UK Government on that, working alongside colleagues

in Glasgow health and social care partnership in an effort to progress the matter, because we know that the introduction of such facilities could save lives.

We also set out the benefits of investing in family-inclusive practice and support, recognising that taking a whole-family approach can bring huge benefits for all who are involved. The families that I spoke to this morning really appreciated that approach.

Our strategy recognises the importance of language and the significant impact of stigma on individuals and their families and loved ones. I understand that issue much more since I came into office: stigma has a real impact and is a block to people getting the treatment that they need. We have committed to using the language on substance use that is set out in the Global Commission on Drug Policy's guidelines, which were published earlier this year. I encourage other people to do likewise, because some of the language that is currently used is plainly offensive.

Jenny Marra (North East Scotland) (Lab): Will the minister take an intervention?

Joe FitzPatrick: Yes.

The Deputy Presiding Officer: You are in your final minute, minister, so please be quick, Ms Marra.

Jenny Marra: The minister announced £20 million for ADPs this morning. He knows as well as I do that the budget for the ADP in Tayside has been underspent for the past two years. Does he recognise that there are more intrinsic problems with ADPs and that the issue is not just about cash?

Joe FitzPatrick: The member makes a good point. That is why the strategy is about not just how ADPs deliver but a much more holistic approach. We have fantastic third sector organisations, which run services such as the Cairn centre, which I visited this morning, and the amazing 120 recovery groups across Scotland, which do fantastic work.

In Scotland, we have a reputation as world leaders on taking action to prevent future harm, from the implementation of alcohol minimum unit pricing in May to our support for safer consumption facilities. We had cross-parliamentary support for alcohol pricing measures, and we call for consensus on preventing and tackling drug harm, too.

I understand that the motion and amendments were drafted before "Rights, Respect and Recovery" was published this morning, but I hope that, having seen the published document, members of all parties will feel able to get behind a strategy that was finalised very much in

collaboration with a wide range of stakeholders. This subject requires us all to work together, going beyond traditional party lines, as we seek to improve the health of some of the most vulnerable people in our society.

I move amendment S5M-14914.2, to leave out from "drug-related" to end and insert:

"public health crisis related to the harm associated with the use of opiates and/or benzodiazepines and other drugs; further recognises that the harm has increased since 2007, with 934 fatalities recorded in 2017; believes that Scotland needs a drug and alcohol strategy founded on the principles of rights, recovery and respect, and which places public health at its heart and does not stigmatise those seeking recovery or harm reduction, and calls on the UK Government to make the necessary changes to the Misuse of Drugs Act 1971 to allow the creation of a medically supervised safe consumption facility in Glasgow, or empower the Scottish Parliament to do so."

15:01

Monica Lennon (Central Scotland) (Lab): The debate is crucial, because Scotland is experiencing an alcohol and drugs-related public health emergency. On that, Miles Briggs is not wrong. We are pleased that he secured the debate.

We recognise that members of all parties have passionate and strong views on the subject. In the 10 years since the previous drug and alcohol strategies were published, there have been more than 15,000 substance-related deaths. To put that number in context, it is equivalent to the entire population of Larkhall, one of the towns that I represent. If we continue at this rate, in 10 years' time the population equivalent of another similar town will have been wiped out, too. That is a state of emergency, and the amendment in my name seeks recognition of that.

This is my first opportunity in the chamber to congratulate Joe FitzPatrick on his appointment as minister. I believe him to be sincere in tackling the issues and I very much welcome his comments about stigma and language.

However, I am sure that the Government's health team—the entire team is in the chamber—agrees that we cannot have the luxury of a honeymoon period, because people's lives are at risk today and will be tomorrow and the next day. There were 934 drug-related deaths and 1,235 alcohol-related deaths last year—that is 2,169 preventable deaths in just one year.

We can support the wording in the Tory motion and in the Scottish Government's amendment, which means that we will knock out our amendment. We want to find consensus—this is not about making cheap points in the chamber. However, we do not support all the proposals that

are on the table or agree with some of the rhetoric that we have heard today.

If the Government declares the alcohol and drugs crisis to be a public health emergency and puts the full force of Government behind the issue, it will have full support from the Labour benches.

Although we support the Tory motion, we do not support the strategy that the Tories released to coincide with today's debate. Although it says some decent things, I fear that other aspects of it are dangerous and appear to be shaped by Tory ideology, rather than evidence-based solutions.

Miles Briggs: When will the Labour Party put forward its ideas? We have heard nothing from it, and it does not seem to have any ideas. The Government published its strategy today, just ahead of this debate.

Monica Lennon: Don't dare, Miles Briggs! If Miles Briggs were really genuine about this, he would not rush out a strategy on a few bits of paper to get ahead of the Government and bounce it into a strategy. In Miles Briggs's strategy, he talks about the financial costs of the drugs crisis. What about the financial cost of austerity? There is no mention of that, and the word "poverty" does not feature, so the strategy from Miles Briggs is not worth the paper that it is written on. *[Interruption.]* I will continue.

We are passionate about this and I know that Miles Briggs is, too. Last year, following my members' debate on alcohol and drugs-related deaths, people around Scotland got in touch with me—I am sure that they got in touch with other members too—to share their family stories of the devastation that alcohol and drug harm causes. It is crucial to countless families around Scotland that we get the approach right. I do not think that we should come to the chamber and have to react to different statements, because we have heard some fantastic contributions from all the stakeholders around Scotland. There are some things on which Scotland leads the rest of the world and I want to pay tribute, as I am sure do Miles Briggs and members across the chamber, to Alcohol Focus Scotland, Scottish Health Action on Alcohol Problems, the Scottish Drugs Forum and Scottish Families Affected by Alcohol and Drugs. Their input and their evidence have helped Mr FitzPatrick improve his strategy.

Today is not a day for cheap points. A lot of us know from family experience and through supporting constituents that the human stories behind alcohol and drug harms are always complex, often chaotic and invariably tragic.

One issue that Labour members have with the Tory strategy is that it fails to recognise that people experiencing addiction are in the grip of an illness. We are talking about illness. There are

some positive policies in there, but I fear that the strategy reinforces the stigma around drug harm. If we are going to have policies around trying to arrest and punish people to get them into recovery and telling them that they will feel the full force of the law if they do not co-operate—*[Interruption.]* That is the rhetoric that is coming across and I say to Miles Briggs that that is not helpful.

In contrast—I do not often agree with or support the Scottish Government—a rights-based approach is the correct one. A stated commitment to the right to health has the potential to make a real difference to people's lives. Alex Cole-Hamilton and Jenny Marra made the point that alcohol and drugs partnerships must be properly resourced. I do not agree that the Government has always played fair on that. A lot of that is to do with funding, but there are issues around how resources are spent and the transparency around that and I am sure that others will make those points.

We agree that a new approach is required. When 15,000 people have died during the course of the previous strategies, we must all be brutally honest and say that it is not just a refresh that is required. This is a public health emergency, and the Scottish Government should declare that for the good of the country. It is also imperative that the Scottish Government commits to targets to focus and reduce alcohol and drug harm. Preventative action, harm reduction and reducing health inequalities will be key to tackling the issue meaningfully and effectively.

Death is not the only indicator or measure of alcohol and drug harm. There are over 60,000 problematic drug users in Scotland. Although it is difficult to identify the true number of problematic alcohol users, there were over 36,000 alcohol-related hospital admissions in the past year alone. Specialist medical responses are urgently required for alcohol-specific illnesses, such as foetal alcohol spectrum disorder and alcohol-related brain damage. As it looks likely that the Labour amendment will fall, does the minister support the asks in our amendment?

The treatment of alcohol and drug misuse must include recognition of the social and economic root causes, and that is where the Tory strategy fails. Addiction does not discriminate and it can affect people from all walks of life, but deprived communities are more likely to be impacted by drug and alcohol harm. I wanted to talk about stigma, so I am pleased that the minister mentioned it.

We will support the Scottish Government's amendment, although I am disappointed that our amendment is likely to fall. I will therefore finish with a few questions that get to the crux of the matter. Does the minister agree that there is an

urgent alcohol and drug-related crisis? Will the Scottish Government declare a public health emergency and work with all of us for the good of the people of Scotland?

I move amendment S5M-14914.3, to leave out from “related” to end and insert:

“and alcohol-related public health crisis; understands that the number of people engaged in problematic use of opiates and/or benzodiazepines has increased since 2007, with 934 fatalities recorded in 2017, and that Scotland now has the highest drug death rate in Europe, and calls on the Scottish Government to take an evidence-based approach and declare this a ‘public health emergency’ as called for by the Scottish Drugs Forum; considers that the Scottish Government’s draft drug and alcohol strategy, *All Together Now*, is not fit for purpose, and that it will not deliver the additional capacity or intervention needed to reduce Scotland’s damaging drug and alcohol levels, and recognises that a new approach is needed to tackle this crisis; accepts that the stigma experienced by people with alcohol and drug issues and their families is a barrier to recovery and believes that the strategy must go further to address this in order to achieve long-lasting culture change; believes that greater priority must be placed on preventative action, harm reduction and reducing health inequalities to help people avoid harmful substance use in the first place; recognises that a commitment to reducing alcohol- and drug-related deaths and poor health outcomes must be backed by sustainable funding for alcohol and drug partnerships and strong public services; calls for the new strategy to include a target to reduce the number of drug-related deaths by 50% in the next five years and in line with the World Health Organization’s *Global Status Report on Non-Communicable Diseases 2014*; agrees that the Scottish Government should adopt a national target to reduce population alcohol consumption in Scotland by at least 10% over the next 10 years, and recognises that there are distinct needs in relation to alcohol that require specialist responses, including acute alcohol withdrawal, foetal alcohol spectrum disorder, alcohol-related brain damage, liver scanning and alcohol brief interventions, which should be reflected in the Scottish Government’s forthcoming action plan.”

15:09

Alison Johnstone (Lothian) (Green): Like all members, I regret that we are discussing an 8 per cent increase in drug-related deaths since last year. We have heard that another 934 people have lost their lives, due at least in part to drug use.

Earlier this year, when we debated the need for safe injection facilities, the Parliament agreed that those should be implemented in Glasgow and called on

“the UK Government to make the necessary changes to allow”

that. It is frustrating that the Parliament does not have the powers to authorise much-needed public health facilities in its own right. I know that some members will want to discuss the scope for heroin-assisted treatment—and I am interested in that—but the fact remains that, in Scotland, we have long agreed to treat addiction as the public health

issue that it undoubtedly is. If UK legislation does not reflect that, the relevant powers should be devolved.

I thought that that earlier debate showed our collective commitment, as a Parliament, to prioritise the safety of drug users and help prevent addiction. In that debate, Daniel Johnson stressed that

“there is a failure in trying to criminalise individuals—that is fundamentally flawed logic”,

and Neil Findlay suggested that we should be looking to Portugal where

“the possession and consumption of all illicit substances”

has been decriminalised since 2001. I felt encouraged by Brian Whittle’s honesty when he told us that his views on

“a safe injection facility in Glasgow are no longer black and white”.—[*Official Report*, 19 April 2018; c 95, 73, 68]

He took the opportunity to ask people at Addaction in Kilmarnock what they thought about safe drug consumption facilities and found that they were interested in what results might come from having facilities in Glasgow.

Brian Whittle (South Scotland) (Con): Prior to today’s debate, I spoke to Addaction on that topic. My issue—I wonder whether the member agrees with me—is that the Scottish Government has many levers in its remit, so why are we focusing on the one thing that is not in its remit?

Alison Johnstone: It is clear in this debate, and even from the minister’s contribution, that we are not focusing on only that one thing and that this is a holistic strategy. If we want to help people who are suffering from drug addiction, we have to be looking, as Monica Lennon has rightly said, at welfare and employment. There is a lot involved in this issue and I do not think that we are focusing on that one thing, but I thought that there was a real will to get people who inject help within safe facilities. When people attend safe facilities, they are more likely to get the help and the support that they need. Along with that, there is consensus that we should be investing more in prevention.

Today’s motion and amendments focus on the Government’s draft strategy, although I note, as other members have mentioned, that the final version of the strategy was published today. The timing of the debate should not cloud our discussion of the issues at hand.

The Government’s draft strategy fell very short, and on my quick reading of the final strategy so far, it is clear that there is much work to do if we are to deliver real change. I certainly agree with the emphasis that the Government’s motion places

“on the principles of rights, recovery and respect”.

We need strategies with public health at their heart that do not stigmatise people.

Miles Briggs: The member and I visited residential places, of which Edinburgh has only 12. There is nothing in the strategy that will make sure that we realise the potential of having far more such places, so that people can get into recovery. Is that not something on which we all need to focus and on which the Government needs to think again?

Alison Johnstone: Absolutely. If there is a need for more residential places—and that point was well made during our visit—we should insist on that.

The cross-party group on alcohol and drugs raised dual misgivings about the draft strategy, because it said little about how it will reduce fatal drug overdoses. That cannot be acceptable when drug-related deaths are so high. I recognise that the final strategy highlights the particular risk of overdose for prisoners on remand, but all deaths from overdoses must be seen as preventable. They are all tragedies. I was shocked to find that, compared with a decade ago, there has been a more than 200 per cent increase in drug-related deaths among women.

We know that there is also a cohort of ageing long-term drug users who have multiple, complex healthcare needs to contend with, as well as their addiction. They often feel written off, so we have to make sure that the drugs strategy includes all who suffer through drugs.

I would like to press the minister on two specific issues: the Government's timeframe for appointing a childhood bereavement co-ordinator to improve support for children who have lost parents; and its timeframe for establishing a national commission to oversee the implementation of safe injecting facilities.

Many of the concerns that I had about the draft strategy, such as its lack of focus on reducing blood-borne virus transmission, are simply not reflected in the Conservatives' proposals. In Scotland, we have made a commitment to eliminate hepatitis C by 2030, and the final drugs and alcohol strategy at least supports that ambition and intends to make hepatitis treatment in the community a part of future addiction services. In addition, safe injecting facilities will play a key role in reducing the risk of death from overdose and in reducing blood-borne virus transmission.

The Conservatives' recommendations would introduce a new public awareness campaign to prevent drug use. I am sure that that is well intended. There is a place for that, but evidence suggests that mass media public information campaigns are not an effective way of influencing

such behaviour. It would be helpful if, as the debate goes on, Conservative members could expand on the extent to which their approach to recovery encourages abstinence, which will not work for everybody. The Scottish Drugs Forum states that abstinence is a state or a condition, not an end in itself, and that it need not be the measure of success for services or the goal of treatment.

I believe that there is scope for improvement in the Government's final drugs and alcohol strategy, but I welcome the focus on rights, respect and recovery and will support the Government's amendment.

15:16

Alex Cole-Hamilton (Edinburgh Western) (LD): I am very grateful to the Conservatives for bringing their important motion to the Parliament for debate. There are no two ways about it: this is a public health crisis. As such, the measure of our public policy response is the measure against which everyone in the chamber will ultimately be judged.

It is fair to say that, 10 years after "The Road to Recovery: A New Approach to Tackling Scotland's Drug Problem" was first adopted—I am grateful to the Conservatives for articulating their involvement in that—we can see where that strategy worked and where it has failed, and where work needs to be done to build on that in the future. However, it is also fair to say that, in recent times, the Scottish Government's public policy response to a public health crisis has been wholly inadequate. That is evident from the 23 per cent cut in funding for alcohol and drug partnerships. I am not overstating things when I say that that can be measured out in human lives. All told, that resulted in a cut of £1.3 million per year for drug services in our nation's capital, which brought with it untold death and suffering. The drug death rate in Scotland is more than double what it is in England, and the HIV outbreak in Glasgow that started in 2015 has still not abated.

Services do not depend only on money. With the loss of money came a loss of certainty. Many services lost staff, who were unsure whether their contracts would be renewed. The institutional memory of organisations that have been working valiantly in this field for a very long time has been frittered away, and we will struggle to get it back.

In their excellent contributions, Monica Lennon and Alison Johnstone talked about the inexorable link between drug use and a range of poor social outcomes on poverty, housing and employment. We should remember that housing is vital when we come to the end game, when we have helped to stabilise the lives of those who have been

involved in chaotic substance misuse. Many people who leave drug treatment facilities or prison often go back into communities where peer groups led to the chaotic behaviour in the first place. Our response on a public policy level must be based on a whole-systems approach.

Members all know that my background is in children's rights and children's services. Children who are affected in this area are often an afterthought. I was dismayed not to see more about that in the Government's draft strategy. "Getting our Priorities Right: Good Practice Guidance", which informs how primary care workers and social workers respond to the needs of Scotland's community of children who are affected by problematic parental substance use, has not been refreshed since 2013.

This week, it was revealed in response to a freedom of information request by the Scottish Liberal Democrats that, since 2015, 600 babies have been born with neonatal abstinence syndrome, which means that they are born addicted to substances. I cannot think of a worse start to life, yet that is happening in Scotland in 2018, and our response to it so far has been inadequate. That stems from our failure to fully grapple with and understand the needs of people who have adverse childhood experiences. Once again, I ask the Scottish Government to heed the call of Harry Burns to capture ACEs, and I am glad to see some of that in the strategy.

It is easy for me as an Opposition politician to poke holes in a strategy, so I will suggest some empirical practical solutions. First, I want a ministerial commitment—I hope that we get one in the minister's closing remarks—that this Scottish Government will endeavour to protect ADP budgets, so that drug and alcohol services in our communities have the surety of continued Government funding to recruit and retain staff and build relationships at the heart of the communities where it is most needed.

We need to recognise that this is a public health issue, and I welcome that the Government has finally moved from seeing it as a justice issue. I ask the Government to go one further: to convert that recognition and stop sending people to jail for possession. Instead, we should be sending them into treatment or education, given that, in places such as HMP Addiewell, 50 per cent of those tested on release were still testing positive for drugs.

Tom Arthur (Renfrewshire South) (SNP): Does Alex Cole-Hamilton support calls for the devolution of powers on drugs to this Parliament?

Alex Cole-Hamilton: Our response to the issue has to be a whole-island response. The problems are not situated entirely in Scotland and there has

to be a solution across the board. However, where we have sentencing power, we should not be sentencing people for low-level drug possession, for the reasons that I just described.

Neil Findlay: Will Alex Cole-Hamilton take an intervention?

Alex Cole-Hamilton: I must make progress.

I want to understand, and receive an explanation from the Scottish Government, why drug treatment and testing orders, which the strategy says have a beneficial impact on drug addiction and offending behaviour, were used only 31 times last year, despite 4,400 convictions for drug possession.

Similarly, I want to see Scotland-wide proposals for heroin-assisted treatment, which we have heard more about today.

I close by focusing on the impact of the issue on children. We need to do more for the children who are affected by parental substance use, as life can be cyclical. People can learn behaviours because of the trauma that they experience as a result of chaotic parental substance use. That means capturing adverse childhood experiences, as former chief medical officer Harry Burns has asked us to do.

On a local treatment centre wall, I saw a quote that struck me as being where we need to take the debate. It said:

"Tomorrow is the most important thing in life. Comes into us at midnight very clean. It's perfect when it arrives and it puts itself in our hands. It hopes we've learned something from yesterday."

There are thousands of people in this country who are looking to the Parliament for help to stabilise the situation in which they find themselves. We will do them all an injustice if we do not heed their call.

The Deputy Presiding Officer: We move to the open debate. Speeches should be up to six minutes, please.

15:22

Liam Kerr (North East Scotland) (Con): I am pleased to have the opportunity to support Miles Briggs's motion and the Scottish Conservative strategy to reduce drug deaths and addiction.

We need new and fresh thinking. Miles Briggs set out some of the stark realities of the current situation. I will add to those statistics. Nearly 1,000 Scots died last year due to overdoses, which is almost double the number who died 10 years ago and is two and a half times the UK rate. Scotland is on track to record this year, for the first time, more than 1,000 drug deaths, which is the worst drug-death rate in Europe. There has been an increase of nearly 10,000 problematic users of

drugs including heroin, methadone and sedatives in the 11 years since the SNP launched its failed strategy in 2007.

That tells me that when Professor McKeganey described the SNP's so-called road to recovery programme as "disastrous" and as creating a "financial black hole" and an "addiction industry", he was right.

We have the same tired thinking from the new SNP plan today. David Liddell, the director of the Scottish Drugs Forum, said that

"the draft strategy's most serious deficiency was its lack of clear measurable targets",

which exposed a total lack of vision. However, the strategy still has no targets.

Joe FitzPatrick: I wonder whether Liam Kerr has heard David Liddell's comments on the strategy from today. He said:

"We welcome the fact that reducing the number of preventable overdose deaths is the key focus of the strategy."

In 2018, we are likely to see more than 1000 Scots die from drug overdose deaths. He said that

"There are key elements of the strategy that will help us respond to this public health crisis".

He goes on in positive terms about the strategy.

On the Conservative alternative, Roy Robertson, who is a professor of addiction medicine at the University of Edinburgh, has said that the strategy proposals that were published yesterday were based on little evidence and contain "some rather strange ideas". He added:

"I do not know what this paper has to offer and what it means in terms of the plans the government has in place but it is disruptive, poorly thought out and retrogressive in its approach."

Liam Kerr: I thank the minister for that speech. Roy Robertson also said that the SNP strategy is "inadequate" and "watered down". David Liddell said that there were no targets: there are still no targets. The minister cannot divert from his failures by selectively quoting the likes of Roy Robertson.

Drugs are a blight on our communities: they destroy lives and break up families. Our plan identifies ways to achieve what we all hope for: fewer people addicted to drugs, fewer deaths and fewer lives destroyed. We are talking about drug abusers for whom better outcomes are achieved by addressing the root cause of criminal behaviour, rather than by letting it spiral out of control into continued drug use and reoffending.

The Scottish Conservative strategy sets out our plan to deal with first-time drug offenders—to ensure that their first time is also their last. First-time drug offenders would be given a choice: a criminal record or referral to a local commission

with powers to prescribe treatment. That intervention would be kept on record, and would be seen as an aggravating factor if the individual were to reoffend, but it would also mean that a criminal record could be avoided in the first instance.

Neil Findlay rose—

Clare Haughey rose—

Liam Kerr: Presiding Officer, will I get back time at the end?

The Deputy Presiding Officer: I think that you might, but for only one intervention.

Liam Kerr: I will take Clare Haughey's intervention.

Clare Haughey: Does Liam Kerr not accept that addiction is an illness?

Liam Kerr: I certainly accept that in some circumstances addiction can be an illness. Absolutely. *[Interruption.]* What those circumstances are is a matter for another debate—or for an intervention, but I have no time. I do not understand why the member is attacking me on this, because it is a reasonable point. *[Interruption.]*

The Deputy Presiding Officer: Ms Haughey. Thank you.

Liam Kerr: The point that we are trying to put forward in our strategy is that we need to take a new approach—a bold and innovative approach. That is why prosecution would remain the fallback option if an offender were not to keep within the boundaries that had been set by the local commission. That would be a powerful incentive to comply with the contract terms and to ensure personal responsibility.

A similar system is already in operation in parts of the UK. In that system, people avoid prosecution if, for example, they sign a four-month contract that requires of them no reoffending, doing community work, restorative justice measures and work with a navigator. The schemes have been proved to reduce reoffending significantly and to improve police relationships with drug users so that there is better intelligence on dealers. They reduce the risk that people will fall into a life of crime and—most important—they save lives.

The second key strand is that people who are put in jail must not be forgotten about. In the prison environment, there is an opportunity to engage with people, many of whom do not engage with the healthcare system due to having a chaotic lifestyle. The prison environment is a unique opportunity for getting individuals clean. That starts with mandatory dried blood spot testing on admission, to help to identify drug users and for

delivery of hepatitis C treatment and drug rehabilitation services.

Tom Arthur: Will the member give way?

Liam Kerr: No, I have no time.

Tom Arthur: I have a point of order, Presiding Officer.

The Deputy Presiding Officer: Point of order.

Tom Arthur: Standing orders make it clear that it is incumbent upon members to consider the language that they use in the chamber. The word “clean” is offensive and derogatory; more appropriate would be the word “absent” or the phrase “a person who has stopped using drugs”. Will the Presiding Officer give her opinion on that matter?

The Deputy Presiding Officer: That was not a point of order, Mr Arthur. Please carry on, Mr Kerr.

Liam Kerr: Governors have spoken about their frustrations about prisoners making real progress that stops once they leave. Services must not be cut off on release, but should instead be followed by transitional support and treatment in the community. Under our life plan, an individual’s care would be transferred to their local general practitioner, who would oversee progress, access services and ensure that the prisoner’s progress was maintained.

Ours is a bold and innovative strategy, and it is necessary because 11 years of SNP Government have failed to find a solution. Instead, as the motion states, the SNP’s strategy is “not fit for purpose”. We have to try something different. A new approach is needed to tackle the crisis, and the question today is whether the SNP will put the health and wellbeing of the people of Scotland first by voting for the Scottish Conservative motion, or continue with the same party politicking and attempts to make stupid points of order, which has failed the people time and again. We shall see at decision time.

The Deputy Presiding Officer: I must say to Mr Kerr that it is for the Presiding Officer to decide on points of order—not for members.

15:30

Joan McAlpine (South Scotland) (SNP): I start by welcoming the Government’s new combined alcohol and drugs strategy. I welcome the minister’s proactive approach to the topic, and I welcome him to his new position.

I have a number of things to say about the Conservative strategy. Because this is a Conservative debate, I would like to start by quoting from an expert’s response to the Conservative paper. Dr Hannah Graham, who is a

senior lecturer in criminology at the University of Stirling and an expert in the field made some interesting comments earlier this week. She started out being quite positive, and said:

“The @ScotTories new drug policy has benevolent intentions ... What it doesn’t have enough of are details and commitments on what, how, who, why targets will be met. It isn’t costed”.

Dr Graham’s critique suggests that the Tories treat the matter too much as a criminal justice issue, as opposed to a health and human rights issue.

Miles Briggs: We have outlined two key targets to halve drug deaths in five years. Ms McAlpine’s Government’s strategy, which was published today, contains nothing. That is the target and we need it for our country.

Joan McAlpine: Far be it from me to contradict Dr Graham, who is an expert in the field. I am quoting what she said about the Tory paper: she is clearly not very impressed with it. She points out that the Tories are

“the only major Scottish political party to oppose plans for a drug consumption room in Glasgow,”

which we all know would reduce the number of drug deaths that are caused by the HIV increase that we have heard about already.

Dr Graham went on to note that the Tories say that

“drug users’ being caught for a second time should be seen as ‘an aggravating factor’ and they ‘would feel the full force of the law,’ ... is this a two strikes and you’re out drug policy? We can’t arrest or punish our way out of Scotland’s high rate of drug deaths nor scale of problem drug use—first & foremost, these are health and welfare not criminal justice issues.”

That is what the Government’s strategy is all about.

Dr Graham went on to talk about the rate of deaths among people over 35 in Scotland, and pointed out that the Tories acknowledge that, although that acknowledgement contradicts the aim of their policy to target first-time drug users. It is the deaths of those older people that I want to talk about in the rest of my speech, because official figures show that the biggest cohort of drug-related deaths is people aged 35 to 54.

A person who is aged 40 who dies either because of problematic drug use or because of illness that is associated with many years of problematic drug use would have been aged 20 in 1998. That was a year before this Parliament was created, so it is not simply a problem of the past 10 years; it has much deeper roots. It was during the Conservative Governments of Margaret Thatcher and John Major that Scotland experienced a wave of heroin abuse that devastated many of our urban areas, and which

we are still living with today as we witness those high death rates.

John Scott (Ayr) (Con): Will the member give way?

Joan McAlpine: No. I want to make progress.

I acknowledge that Miles Briggs was only 10 when Irvine Welsh's book "Trainspotting" was published in 1993, but the Tories ought to acknowledge that their party policies created that "Trainspotting" generation.

Miles Briggs: Will the member give way?

Joan McAlpine: No. I have already taken an intervention from Mr Briggs.

One in five people out of the total Scottish workforce—

Neil Findlay: Will the member give way?

Joan McAlpine: This is important. One in five people out of the total Scottish workforce lost their jobs in the years 1981 to 1983, and by 1985 Scottish unemployment had reached 400,000 for the first time since the 1930s.

Jenny Marra: Will the member give way?

Joan McAlpine: I want to make progress.

We know that there is a direct link between adverse childhood experiences and drug and alcohol use. That generation of children and young people experienced adversity on a colossal scale. The pressure of worklessness on families was appalling, but so too was the hopelessness of being told that their communities were not valued and that their futures had been written off.

Research that was carried out by the University of Glasgow and NHS Scotland only last year found that drug-related deaths were linked to those social and economic changes in the 1980s. Other studies, for example by the Glasgow Centre for Population Health, reached similar conclusions about the higher rates of deaths in that city.

As I said, we are experiencing the terrible legacy of Westminster rule in the 1980s and 1990s. Scotland has made enormous progress as a result of the progressive policies that have been pursued in this Parliament, but we cannot write off that historical legacy.

The new strategy, which was launched today, goes in a completely different direction to the punitive actions that the Tories suggest. We have already seen improvements. It is encouraging that figures on recent drugs deaths show fewer deaths among under-25s, and highlight falling heroin use, particularly among under-25s.

Our more progressive health and human-rights based approach recognises that deprivation,

poverty, trauma and adverse childhood experiences can cause people to turn to alcohol and drugs. Treatment can no longer just be clinical; it must also address the deep-rooted social and economic circumstances that people face.

I welcome the Government's strategy of treating people and all their complex needs—not just the addiction. It is also correct that we tackle the inequalities and traumas behind substance misuse, for which the Tories are responsible—and not just because of their policies in the 1980s and 90s, because many of their current policies, especially their welfare policies, are causing social inequality now.

15:36

Neil Findlay (Lothian) (Lab): There are times when debates in the chamber really depress me. Today is one of those times. I was hoping that today we would come to agreement or consensus on one thing that should be obvious to anyone who shows even a cursory interest in the issue of drug policies: the war on drugs has failed disastrously. Just like the years of alcohol prohibition in the US, the years of drug prohibition in this country have been an abject failure that have left us with unregulated products that are controlled by criminal networks, that reach into every community and that make illicit drugs among the world's most lucrative commodities.

The impact on communities—especially poorer communities such as the one that I live in—has been heartbreaking. Drug use is synonymous with organised and violent crime, with people trafficking, with early death, with social isolation and with mental ill health, which all have consequential impacts on the national health service, public services and the justice system. That is not to mention the impacts on the wellbeing of individuals and families. People are the collateral damage in the 50-year war on illegal drugs that has cost £100 billion a year. Despite all that global money, we still see 200 million to 250 million users across the world, many of whom are exploited and many of whom are criminalised for their addiction.

The failure of that approach is at its starkest and most devastating here in Scotland, where we now have more than 1,000 drugs deaths a year. The streets are awash with cannabis and cocaine, heroin can be bought in every community and spice is the drug of choice in our prisons. I recently visited Addiewell prison to discuss the spice problem. I have visited local drug and alcohol projects and spoken to drug users who are desperate for help, but are unable to get it because of excessive waiting times.

John Scott: Does Neil Findlay agree that it is absolutely shocking that 90 per cent of the people who are detained at Her Majesty's pleasure at Bowhouse prison present with drug problems on arrival? Does not he agree that something should be done about that?

Neil Findlay: I absolutely agree. The last place that such people should be is prison, but more of them would be if we were to take the Tory approach. John Scott is right, but he needs to speak to his colleagues to get them to take a different approach.

I spoke recently to someone who told me that they had learned a lot in prison. They learned how to steal and defraud, how to take different drugs and how to steal cars. The last place that person should have been was prison, for a health problem such as addiction.

I have spoken to people who have been waiting months for a first appointment because they have a heroin addiction. I have spoken to people who have spent decades in addiction. They can have as many conversations as they want with their general practitioner about getting more methadone, but they cannot have a conversation about how they could get off illicit drugs and off methadone. Let me say this: I am not a methadone critic. It has its place, but many people want to be drug free and methadone free.

I have met families of people who have taken their own lives because they could not get the mental health support that they needed. I have spoken to police officers on the front line, to academics and to pressure groups that work with drug users. At every meeting, I asked what we need to do. Not one of the experts, police officers, prison officers, health workers or drug users whom I met said, "Let's continue with the current strategy, because the war on drugs is so jolly successful." It is not; it is a disaster: we have a public health emergency on our hands. The evidence is staring up at us from 1,000 mortuary slabs. Policy is failing, and that is having deadly consequences.

It depresses me that an intelligent and decent man such as Tom Arthur reduces the debate to a constitutional wrangle. It is pathetic and I will tell him why: I care as much for drug addicts and people who die from using drugs in Manchester, Newcastle, London, Dover and Cardiff as I do for those in Scotland.

Tom Arthur: Will the member take an intervention? That was utterly unfair.

Neil Findlay: No, I will not.

I heard Joan McAlpine depicting the "Trainspotting" generation. I have news for her. Does she know what a drug user looks like? Have

a look at the people around us or the person next to us. We are not talking about the dishevelled "Trainspotting" image. They are people in our families and communities, they are constituents who come to see us and they are friends and relatives. That is who drug users are.

Joan McAlpine: That is not what I said. Surely the member agrees that there is a legacy of the social and economic impacts of the 1980s and 1990s. That is what the University of Glasgow and other researchers have said, and it is why there are high rates of deaths among older drug users. It was a reasonable point to make, and I hope that he agrees with me.

Neil Findlay: I agree with some of that, but let us not depict all drug users in that way, because they are the minority. Any academic will tell us that the average drug user is someone like us—they are people in our families and in our communities. We should not have exceptionalism on that issue.

We have higher levels of infection, mental ill health, homelessness and crime. We have more drugs available on the streets and, ultimately, more deaths. I say this often, but if this was flu, measles or meningitis, we would have a national emergency on our hands. I suppose that there just ain't any votes in addiction.

We must learn from other countries. We must learn from the Portuguese model of decriminalisation and harm reduction, from the Canadian experience with cannabis and from the diversionary alternatives that are being brought in now by progressive Labour police and crime commissioners, with the powers that they have, in England. They are establishing schemes to divert people away from prison and addiction.

Miles Briggs: Will the member take an intervention?

Neil Findlay: I will not, at the moment.

Police and crime commissioners are offering a scheme in which offenders sign a contract, undergo mental health treatment and sort out their lifestyle. They are joining up police, community and public health funding streams to improve outcomes for people who suffer from addiction. They are allowing addicts who have not responded to other forms of treatment to be prescribed heroin in a medical setting. They are training people in the application of naloxone.

The Deputy Presiding Officer: Can you come to a close, please?

Neil Findlay: The police and crime commissioners are establishing early warning programmes to alert people about new drugs on the streets and about a range of other issues. Timidity and political cowardice will not work,

neither will cutting drug and alcohol treatment budgets.

I must make this final point. If one cow dies from foot and mouth disease, a national emergency is declared. In this case, 1,000 of our fellow citizens are dying, but nothing much changes. Parliament is failing our people, and we will continue to fail them until there is a significant change in policy. Neither the Government strategy that has been published nor the Tory strategy cuts it.

The Deputy Presiding Officer: I have given leeway to each party's first speaker, but I now need to be a bit stricter with timings. Speeches should be absolutely no more than six minutes.

15:44

Michelle Ballantyne (South Scotland) (Con): I, too, thought that the debate would be consensual, and I have to say that I now feel quite emotional about it all. As the head of a drug and alcohol service, I have dealt with people who are suffering and dying. We need to tone things down, because we ought to be talking together about the issue, not fighting about it, which is not the way forward.

Changing the course of Scotland's relationship with alcohol and drugs has been, quite rightly, on the Scottish Government's agenda since it came to power. Eleven years ago, before I had any involvement in politics and in my professional capacity as head of a drug and alcohol service, I gave evidence to the Scotland's Futures Forum's project on alcohol and drugs. My colleagues and I left that meeting with high hopes that we had a Government that was listening and which was genuinely going to tackle the causes of the problem through a programme of early intervention and supported treatment and harm reduction.

In 2008, "Approaches to Alcohol and Drugs in Scotland: A Question of Architecture" was published. In his foreword to the report, the Presiding Officer at that time, Alex Fergusson, wrote:

"I hope that politicians, policy makers and practitioners will reflect on the project findings and also on the systemic approach it has developed. I hope too that every discussion and debate both at Holyrood and elsewhere for the foreseeable future will reflect back on the considerable learning to have come from this project."

In the spirit of those words, I looked back on that piece of work, reflected on my experiences and thought about how we have come to a situation in which, far from tackling the problem, we have seen it get worse. It is interesting to note that a small survey at the time showed that MSPs' confidence that things would improve was

significantly higher than that of organisations on the ground. Perhaps that should tell us something.

The 2008 report described itself as

"A systems mapping approach to how Scotland can reduce the damage to its population through alcohol and drugs by half by 2025."

Frank Pignatelli, who chaired the project board, summed up the work with these words:

"The Forum has come to believe that significantly reducing the damage caused by alcohol and drug misuse is possible, if we reappraise the architecture of our alcohol and drugs policies for the long term. To do this there will need to be strong leadership, honest debate and sophisticated and flexible policy approaches. All of which must be underpinned by a strong evidence base, sustained investment and continuous monitoring and evaluation."

Ten years have slipped by and, to be honest, I am not convinced that the Government has systematically used the work that was done then to achieve that reduction. Organisations in the field will absolutely recognise the Government's new strategy, because it contains many of the things that were asked for in 2008. However, it fundamentally fails to recognise the need for a whole-systems-mapping approach.

Frank Pignatelli highlighted the importance of such an approach when he said:

"interventions to reduce the damage caused by alcohol and drugs, regardless of how well intentioned, will have intended and unintended consequences somewhere else in the system. By using a systems mapping approach, we have been able to see those consequences more clearly."

Monica Lennon: Will the member give way?

Michelle Ballantyne: I really do not think that I have the time now. I hope to talk to the member later.

What Mr Pignatelli said is important, because, as I know, it is difficult and frustrating to deliver services on the ground consistently and effectively when Government policy does not always support what people know needs doing. However, people are bound to comply, because their funding is dependent on meeting the policy of the day. That is not the way to run services.

Scotland has a complex relationship with alcohol and drugs. We have at times been world leaders on some of these issues; indeed, we still are in some respects. For example, I have always supported minimum alcohol pricing, which, in my view, is a good thing.

Of course, today is world AIDS day, and it should be remembered that treatment in Scotland was largely drug free until the arrival of HIV. The McClelland report of 1986 led to the reappraisal of services; needle exchanges, methadone-substitute prescribing and harm-reduction approaches were all advocated as a result and

had, by 1994, become the accepted forms of treatment. We are now in 2018, but those approaches are not being reviewed in light of modern life. The road to recovery strategy has not delivered everything that we hoped that it would, despite some excellent work on the front line and some positive changes in various areas. As we move towards 2020, we must have an eye to what effective treatment actually means.

I believe that an effective treatment for, say, heroin should be a drug-free discharge within 12 weeks of entering treatment, with no return to treatment within 12 months. Sadly, though, methadone has not been used in that way; indeed, using it to reduce harm over long periods has a knock-on effect for families.

For me, the issue is summed up by a quotation from the author Stephen King—the quotation also sums up some of what has been said in anger today. King said:

“There’s a phrase ‘the elephant in the living room’, which purports to describe what it’s like living with a drug addict, an alcoholic, an abuser. People outside such relationships will sometimes ask, ‘How could you let it go on for so many years? Didn’t you see the elephant in the living room?’ And it’s so hard for anyone living in a more normal situation to understand the answer that comes closest to the truth: ‘I’m sorry, but it was there when I moved in. I didn’t know it was an elephant; I thought it was part of the furniture.’ There comes an aha moment for some folks—the lucky ones—when they suddenly recognize the difference.”

It is time that we in this Parliament recognised the difference. It is not right that anybody lives with such situations. It is children who suffer when they grow up in homes where drug and alcohol use is normalised. It becomes their way of dealing with stress when they grow up, and they therefore become the problem users of the future. We have to save them, and we have to address our drug and alcohol policy.

15:51

Fulton MacGregor (Coatbridge and Chryston) (SNP): I acknowledge Michelle Ballantyne’s fairly consensual input into this debate—unlike that of the other Tory speakers in the debate so far.

I start by addressing the inadequacies of and glaring omissions from the Tory motion. Maybe it is brass neck or maybe it is naivety, but someone who lodges a motion on drug use that does not even reference poverty is not living in the same world as the rest of us.

Just last week, the UN special rapporteur on extreme poverty and human rights gave a damning interim report on the Tory welfare reform that has plunged 600,000 more children into poverty. As Bruce Crawford said in the chamber yesterday, it is

“the biggest failure in public policy this century”.—[*Official Report*, 27 November 2018; c 17.]

Miles Briggs: Will the member take an intervention?

Fulton MacGregor: No. I do not have time.

Yet there is no mention of poverty in the Tory motion; to them, it is just a game.

I am as alarmed as anyone to learn that Scotland has the highest drug-death rate in Europe and that misuse of opiates and benzodiazepines has increased in the past decade. That distressing rise in drug deaths is part of a larger trend across the UK and Europe. It is driven by a number of factors. Chief among them is poverty, as I said, but there is also the demographic of people who use drugs partly as a result of policies from 1980s Tory Britain and whose health, as Joan McAlpine articulately explained, has become more vulnerable as they have become older.

John Scott: Will the member take an intervention?

Alex Cole-Hamilton: Will the member take an intervention?

Fulton MacGregor: No. I do not have time.

Unfortunately, along with others, my constituency has taken the brunt of austerity measures—[*Interruption.*] I have some important points to make, colleagues. The food bank has run out of supplies, the school uniform service has met with unprecedented demand and folk are coming in their droves about universal credit. Colleagues will therefore not be surprised to hear that drug use is also a major concern in my constituency. Nearly every other day, constituents tell me of their concerns for vulnerable people in their communities, and the local newspaper often runs stories to highlight those concerns.

However, it is important to remember that drug and alcohol use is not a choice; it is a symptom of wider social issues, and I am proud that this Parliament regards drug and alcohol use as a health issue and not as a justice issue. We now recognise that factors such as poverty, trauma and adverse childhood experiences can lead people to use drugs and alcohol.

Monica Lennon: Will the member take an intervention?

Fulton MacGregor: I am sorry, Ms Lennon.

We must continue to find new ways to address the issue that are person centred and evidence based. Over the past decade, emerging evidence has changed our understanding of the root causes of addiction and substance misuse.

More work needs to be done with people who move into and out of treatment, and with those who do not access treatment. Not all services are meeting the complex health and social care needs of those who need that support the most, and we must say that. Reasons for falling into and out of treatment are complex, but can include the unpredictable nature of drug use, bad experiences with services, or punitive measures being enforced on patients, resulting in discharge. A strategy to address those issues must challenge services to adapt to such complex health and social care needs.

Alex Cole-Hamilton made the point that funding needs to be in place. I always think that it was a great pity that one of the first pieces of work that I picked up following my election in 2016 was the impending closure of a well-established drug and alcohol service, which was next door to the offices that I was moving into. Its funding had run out and it was unable to get any more from either the council or the health board. Although patients were offered another service, I later found out that the transition was not seamless—and we must remember that we are talking about some of the most vulnerable people.

More broadly, the Government and health boards need to work together to address localised health inequalities. A few weeks ago, I, along with others—including Alex Neil—spoke in the debate on Monklands hospital. Surely the days of having consultations simply on the location of a new hospital are long gone. Health board consultations need to address wider health concerns and inequalities. If a health board is considering taking away from the centre of one of the most deprived areas in the country a hospital with an accident and emergency department in which people present with alcohol and drug-induced emergencies, it is incumbent on the board to suggest ways to address that matter, such as using the current site. I welcome the review that the cabinet secretary has set out, and hope that such matters will be addressed in it.

I warmly welcome the draft strategy that has been announced today, which is outlined in the Government's amendment. My experience as a social worker tells me the strategy is taking the right approach. The principles of rights, respect and recovery are a bold way to address treatment. The strategy aims to help people through collaborative work across sectors and by addressing the root causes that I mentioned. It takes an innovative and person-centred approach that seeks to divert users away from the criminal justice system where appropriate and to tackle wider issues, such as those to do with housing, employment and mental health.

The strategy also includes support for families and loved ones. It allows them to be closely involved in treatment, and it emphasises early intervention for those young people who are most at risk of becoming addicted.

I want to mention briefly Reach Advocacy Scotland, which is based in my Coatbridge and Chryston constituency. Reach is a charity that is made up of people with lived experience—direct or indirect—of addiction, and it works to support recovery for individuals, carers and communities that are affected by problematic drug use and mental health conditions. It is the only rights-based charitable advocacy service of its kind in the country. As such, it is in a fantastic place to take forward the direction that is intimated in the Scottish Government's draft drug and alcohol strategy.

Reach has worked with the Government's policy team to encourage a human rights-based approach to tackling addiction and recognising the life course of individuals who live with addiction and dual diagnosis, and to help develop a model in which advocacy is significant and relevant. It has been asked to apply to the challenge fund and the national development project fund, to cover both its advocacy service and its Scottish Qualifications Authority-accredited training centre, where it delivers the approved advocacy practice award.

I was disappointed to hear that that amazing organisation is struggling to find much-needed funding because of gaps in the local landscape. It asks not to be treated unfairly while talks are on-going because North Lanarkshire does not have an obvious and identifiable ADP board that it engages with in order to obtain partnership working. I back those calls and ask the minister, in summing up, to say whether he can take up that matter directly with Reach Advocacy Scotland.

To conclude—

The Deputy Presiding Officer: Will you conclude now, please?

Fulton MacGregor: We are talking about a major public health concern. We must all do our bit and work together on it.

The Deputy Presiding Officer: We will have to be a bit stricter on times from now on, or members will get their times cut.

15:57

Annie Wells (Glasgow) (Con): I am pleased to have the opportunity to speak in this debate and to have contributed to the Scottish Conservative addiction strategy.

From looking at how we tackle Scotland's long-standing legacy of drug and alcohol misuse, it is clear to me that the Scottish Government's efforts in the past 10 years have failed. We need a new approach.

I grew up and still live in one of the most deprived areas of Glasgow, and I have seen first hand what drug addiction can do not only to the individual but to their family, friends and neighbours. Drugs and alcohol devastate too many lives, and it is time for real change.

In 2017, there was a record number of drug-related deaths in Scotland—as we have heard, there were 934 drug-related deaths. That rate is double the rate in 2007, and it is two and half times higher than the UK average. As I have said in the past, the fact that we have reached that crisis point is evidence of the long-term failings of Scotland's drug policy.

The Scottish Conservatives propose a whole-life strategy that focuses on understanding addiction and providing meaningful opportunities for people to be drugs free altogether.

Stuart McMillan: Given what she has just said, does Annie Wells still agree with the use of the language around problematic drug use in the Scottish Conservatives' motion?

Annie Wells: There is a problem in some circumstances. I know many drug users out there, and I can look about and see the devastation that takes place in Glasgow. We have reached a crisis point because of a failing drug policy, and it is important that we are having a debate today because we must come together as a Parliament. I do not want to see more people dead because of drugs and to be standing here this time next year debating the issue again.

As a starting point, the strategy commits to reviews of all deaths by drugs. As we have seen in the statistics, Scotland's drug-related deaths rate is two and a half times higher than the UK average.

To truly understand the issue and how best to support people with addictions, we have to understand the following. What makes Scotland's relationship with drugs unique? Who are the groups that are most at risk? Where in the system people are being failed? By understanding the journeys of those who have sadly passed away, we can put in place effective strategies that capture people on the journey to addiction, rather than waiting until they reach a crisis point. Prevention is key, making the ask once, get help approach so important. It is right that first-time offenders be given a second chance. Giving them the choice between a criminal record and treatment through a local commission is an

approach that recognises that drug use can be a symptom of deeper, underlying issues.

When I visited Turning Point in Glasgow, I spoke to service users about their personal journeys. Many linked their addiction to adverse childhood experiences such as abuse and family breakdown. For example, a woman who is now in her 30s explained to me that she suffered abuse as a youngster and that that was the starting point that led her eventually to take heroin. She was never offered the support that she so badly needed in her early years of drug abuse. That is why we propose a strong public awareness campaign that builds greater public understanding of the links between mental health problems and substance misuse. It is also important that we look at radical new approaches, such as the potential of anonymous e-mental health apps and the targeting of key demographics through key media.

As I have said in previous debates, the focus should always be first and foremost on getting people off drugs altogether, with the belief that virtually every problem drug user can be supported back into a functioning lifestyle should the right support be given. Currently, people are falling through the net of a system that is not working. As we have heard, the alcohol and drug partnership budget was cut by 23 per cent last year and we are seeing people parked on methadone indefinitely, despite that drug being implicated in almost half of drug deaths last year.

We want to see greater focus on promoting smaller organisations offering abstinence-based local treatments that will help drug users become drug free. We want to see a dramatic expansion of support for the third sector—

Emma Harper (South Scotland) (SNP): Will the member take an intervention?

Annie Wells: I am sorry, but I do not have time.

We want to see a dramatic expansion of support for the third sector so that it has access to a direct fund to help establish places for rehabilitation. When I met the director of the River Garden Auchincruive project in Ayrshire, which opened this year, I was really inspired when I heard what the project is trying to achieve. Based in a residential setting, the project offers free accommodation for those who volunteer and the opportunity for employment in the village's shop, cafe and bakery. That kind of whole-lifestyle approach can make a real difference.

We do not want to park people on methadone. Of course, methadone will always have a role to play, but we desperately need a full, independent review of its use. At the moment, we do not have a full picture of how often patients are reviewed and exactly how many people are on methadone prescriptions. That needs to change.

Any life that is lost to drugs is an absolute tragedy, especially for the family and friends closest to those who lose their lives as a result of drug abuse. For too long, a number of measures that have been seen as tried and tested have failed those who, for a number of reasons, turn to drugs. It is time for a radical new approach that fits the challenges of this day and age. I believe that the Conservatives have laid out many such policies today.

16:03

Tom Arthur (Renfrewshire South) (SNP): First, I acknowledge the point that Michelle Ballantyne made at the opening of her speech when she said that we should be talking, not fighting. I associate myself with that remark, because this topic is far too important for us to descend into political point scoring about it. Even if none of us has drug users in our own families, we will have friends and relatives who have been affected directly as a result of the challenges around the problematic use of drugs. It is an incredibly difficult subject and I understand that emotions are running high in the debate, but I want to address a couple of points that have arisen.

Neil Findlay accused me of seeking to play constitutional politics. I presume that that was with reference to an intervention that I made on Alex Cole-Hamilton when he was speaking about the misuse of drugs powers. I know that Alex Cole-Hamilton is a committed federalist as a member of the Liberal Democrats. There are many countries with a federal constitution that have different drugs powers in different parts of the overall state. That position varies in different countries and the amount of drugs powers varies. My intervention was a genuine inquiry for information; Alex Cole-Hamilton set out his point and, from a sedentary position, I acknowledged that and respected it.

The issue is relevant for Scotland because the Scottish Government has called for powers and conversations so that we can further progress opening a safe consumption facility in Glasgow—

Alex Cole-Hamilton rose—

The Deputy Presiding Officer: Excuse me—I was so enthralled that I did not notice Alex Cole-Hamilton standing up. Go ahead.

Alex Cole-Hamilton: I am grateful to Tom Arthur for giving way. One of the reasons for my belief in a whole-UK solution to drugs issues is that we are making progress—finally, slowly—with the Westminster Government on amending the Misuse of Drugs Act 1971, particularly on the prescribing of cannabis therapies.

Does the member support the Liberal Democrat call for a regulated cannabis market in the United Kingdom?

The Deputy Presiding Officer: I cannot give extra time for interventions, so members need to be wary of the length of interventions.

Tom Arthur: I am grateful to Alex Cole-Hamilton for that intervention. I am looking on keenly at what has happened internationally when such regulation has occurred. Fundamentally, all our policy decisions have to be evidence led and we have to be open minded in considering all options. The policy cannot be driven by ideology; it has to be led by evidence.

The other point that I want to pick up on concerns my point of order during Liam Kerr's speech. I know that Mr Kerr is a considered and thoughtful politician. I appreciate that he got angry, but I wanted to raise the issue of language. We are all on a journey when it comes to the use of language and we can all slip into using terms that are perhaps outdated and which, unbeknown to us, can cause offence.

The simple point that I want to make is about the term “clean”, which Liam Kerr used and which I assume we have all used at different points in our lives. However, the corollary of that term would be that someone who is using drugs is unclean. That is a particular issue for me because, since being elected, I have spent a lot of time working with the Hepatitis C Trust and other stakeholders within that wider community. I have had the privilege of meeting clinicians, third sector workers, academics and many others but the most powerful experiences that I have had involved meeting people who have had hepatitis C and have been cured of it as a result of the fantastic new treatments that are available.

In all those encounters and conversations, people who have had hepatitis C have said to me that it made them feel dirty, which had a stigmatising effect. For many of them, the effect was more stigmatising than has perhaps historically been associated with HIV/AIDS. That sense of feeling “dirty”—to use the word that they used when talking to me—has acted as a barrier to progressing their own lives in many other areas.

I do not seek to chastise anyone for their use of language, but I think that we have a collective responsibility to raise our game when it comes to language; it is a journey for all of us.

In my final couple of minutes, I want to pick up on the fundamental issue—

Liam Kerr: I genuinely thank the member for taking my intervention. He makes a very reasonable point and I want to apologise for what was slightly intemperate language. I did not feel

that it was a point of order, but I accept the point that the member is making; it is a good point.

Tom Arthur: I accept that, and I recognise that perhaps it was not a legitimate point of order.

My final point is on the broader issue of prevention. There are inextricable links between poverty and adverse childhood experiences and how they can relate to people—as young people and later in life—starting to use drugs. We have to be incredibly cognisant of that issue. When we look at that whole cross-cutting portfolio approach, we have to think about the broader suite of powers that we have and how we tackle poverty and social injustice.

In concluding, I have a key message about education. I have read the Conservatives' addiction strategy document and, although I do not agree with all of it and I think that there are things that could be improved, I welcome the policy contribution to the debate.

The document refers to

“A new public awareness campaign to prevent drug use”.

One aspect of the proposed campaign is that it would seek to highlight “the danger of drugs”. That is a mode and a method of communication that has been used historically. Reference was made to the war on drugs, and people of a certain generation may remember Nancy Reagan's “Just say no” campaign. However, the evidence that we have is that campaigns that seek to stimulate fear are quite ineffective. The best approach—it is set out in the “Rights, Respect and Recovery” strategy that was published by the Government today—is to empower people, including young people, to make positive health decisions, not to scare them. It is about giving people information so that they can make those health decisions.

Michelle Ballantyne: Will the member give way?

The Deputy Presiding Officer: No—he is just closing.

Tom Arthur: I will conclude there.

16:09

Jenny Marra (North East Scotland) (Lab): I think that the Parliament will understand and allow it if I address the situation in Dundee and try to draw some conclusions from that. The minister and I have in common that we have very personal interests in that human tragedy. He and I went to school in Dundee at roughly the same time. I lost kids who were in my year at school, and I know that he will have, too, as a result of the crisis in our city and across the country.

There was a report by Sarah Smith on BBC Scotland last night that said that Dundee has the highest drug deaths rate in Europe. We must be really careful when we are talking about the figures, because they always have a context. We know that drug deaths are higher in deprived communities, and Dundee City Council has a very tight boundary around those deprived communities. The drugs commission that was set up in Dundee last year is doing some very good work in putting the matter into a wider context, which I think will have lessons for the whole country.

I want to start with the human face of the subject. Recently, I was talking to a woman in Dundee who told me that she felt that her daughter was safer in prison than she was at home in Dundee, and that was repeated on the BBC report last night. Such stories really bring home some of the insecurity that exists around the issue.

I would like to address a few points that have been made in the debate, and I will start with the point about the ageing cohort. I have always felt that that is a misleading statement. When Government ministers are on TV talking about the ageing cohort, the image that appears is somebody who is about to get their bus pass and has been taking drugs for 40 years. In fact, the age that we are talking about is much younger. I believe that the average age of those who die from drugs is 41. That is exactly my age now. In no other sphere would a 41-year-old be considered old.

We need to look wider than that very simple explanation. We need to look at harm reduction. I think that the minister would agree that we have not been strong on that in Governments over the years, but there is also a big question of toxicology here. That problem is pertinent to Dundee given that the streets are being flooded with blue tabs of Valium that are as cheap as 20p, which, in combination with heroin, are causing a large spike in deaths. I would like us to step back from the point about the ageing cohort, because in no other sphere would we say that we should not look at harm reduction and evidence-based solutions for 41-year-old people who are dying.

I touched on the Dundee drugs commission. It is doing some excellent local work, which is particularly important as we need to understand individuals' circumstances before we can put in place treatment for them. I did a series of meetings on the subject before the commission launched earlier this year, and I saw a huge disconnect—I know that the minister will be aware of this, too—between the stories on the ground and a very defensive account from the NHS drugs services. I understand that doctors feel that they

are being asked difficult questions by the commission, but I feel that that is right. The Dundee commission is doing some really good work here and I hope that, when it reports in May, it will provide a blueprint or a pathway for other places across the country to look at and come up with their own local solutions.

I turn to the important subject of alcohol and drugs partnerships. The minister has today announced £20 million more for ADPs. I mentioned in an intervention on him that in Tayside we have underspent by £381,000 in 2016-17 and £242,000—nearly a quarter of a million pounds—last year, so this is not just a cash problem. There is a huge question about what ADPs are actually doing here. Page 30 of the new strategy that was published this morning says:

“The Scottish Government will support ADPs ... to evaluate current psychological interventions”.

However, we know that very little evaluation has been done by the ADPs in Tayside over the past few years.

Michelle Ballantyne: Will the member take an intervention?

Jenny Marra: No—sorry.

In addition, there has been no implementation of countless recommendations over the years.

Can we answer this question? How do drugs workers and doctors on the ground know what they are trying to achieve, when ADPs, community partnerships, strategic planning groups and integration joint boards all have a locus in drugs services and really just involve rearranging the chairs of NHS and council officials, and when all those people work under—at the last count—about 15 different frameworks? There are multiple strategies, and that is really not useful.

The level of debate this afternoon has been quite poor, compared with what we are used to in this chamber. I think that that is because of the complexity of the issue. I do not think that any member here has the answers to the questions that the motion poses.

I say to the minister that my colleagues on the Labour benches would be very happy to set aside everything that has gone before and work on a cross-party basis with the Government, the Conservatives and other parties, because this is a huge crisis in Scotland, which is killing young people. I do not think that the Conservatives come from a bad or terrible place on this issue; I think that we all have people's welfare at heart. We need to solve this. I make that sincere offer to the minister today, and I hope that we can move forward.

16:16

John Mason (Glasgow Shettleston) (SNP): This is an area of great complexity, as Jenny Marra said. There are no easy answers to the challenges that we face in alcohol and drug abuse and dependence. I presume that, if there were, we or other people would have found them.

It seems to me that there are health and justice angles to the issue, but I am happy to agree that we should place more emphasis on drugs as a health problem without losing sight of the disruption that can be caused in the lives of the people who are impacted around the edges. I frequently receive complaints from constituents whose lives have been made a misery by the dealing that is going on in their closes. Purchasers arrive at all hours of the day and night, sometimes going to the wrong door, and older people, in particular, live in fear in their flats. I have gone into closes—including in nice blocks of flats—and found needles and other paraphernalia on the landings. Some residents are looking for evictions and enforcement of the law.

In my constituency, we have a particular problem in the Calton area. I visited a sheltered housing complex recently, from which we could see people waiting in the street for drugs to be delivered. A short time back, I met two sizeable local retailers in the area. They have had people come into their premises to use drugs or because they were running away from someone due to a related matter. Outside, there is a problem with prostitution, which appears to be linked to the drug problem. One retailer removed all the benches from outside their store because people were using that space to take drugs. BT was asked to move a phone box that seemed to be used only for dealing drugs, but it was not keen to do so.

Meanwhile, the police do their best. A while ago, they closed down a major dealer's house. However, that fragmented and scattered the problem, so that more locations were used for selling than had previously been the case. The police tell me that dealers use drones to get warning of police in the area.

There is clearly a problem, and we are not going to solve it only by controlling supply; we must also tackle demand. A suggestion on page 31 of the strategy document is that we provide safer drug consumption facilities, where drugs can be used that were, as the document euphemistically says, “obtained elsewhere”. I understand that to mean that drugs would continue to be bought and sold illegally but could be used in a safer, more controlled environment. The proposal has some merit, but I remain ill at ease with a proposed future system that would have a criminal element built into it.

Another major option, if we move to more of a health model, is heroin-assisted treatment. I am much more comfortable with that model. If this really is a health issue, it seems to me better that the substance and the using of it are dealt with in a controlled health setting. It has to be said that local residents and businesses are not entirely comfortable with HAT, though. They are concerned that such provision in their areas would bring other problems, as happened in the context of methadone treatment.

Another issue is that people who are addicted to alcohol, drugs or gambling have underlying problems that need to be addressed, and some of those problems will take a considerable time to solve. I am pleased to see that the Conservative policy paper, "Scottish Conservative Addiction Strategy: Life Plan" mentions, on page 2, that there are often "deeper underlying problems". The two examples that it gives are mental health and family breakdown. However, as other members have said, there is no mention of poverty or of a general lack of hope, which may be the reasons why people escape into addiction.

I welcome the emphasis on the need for a person-centred approach rather than a one-size-fits-all approach. Members may have heard about Calton Athletic football club, which was run by Davie Bryce and which had a specific model for getting young guys heavily into sport. The club had some great successes but would clearly not be the right model for everyone. There are many other local projects in my constituency and throughout Glasgow, of which I will mention just a few: the recovery cafes in Shettleston and at Parkhead Nazarene church; Scottish Families Affected by Alcohol and Drugs; the Family Addiction Support Service; Alcoholics Anonymous; Al-Anon; the Simon Community; Turning Point Scotland; the Arch resettlement centre in Bridgeton; and some groups that are particularly focused on women—the list goes on. The third sector must be given tremendous plaudits for the work it is doing.

It is extremely important that we look at individuals and deliver services that address their specific circumstances. We know that, with smoking cessation, some people stop instantly, some reduce gradually and others use a substitute such as vaping. We must assume the same with drugs and other addictions—that we need a variety of options. I am, therefore, slightly wary of the Conservative approach, which can come across as everyone going down one specified route.

The Conservative policy paper makes some reasonable points, including about early intervention and about increasing the role of pharmacists and the third sector, all of which I

would support. However, when I read on page 3 that the Conservatives want

"a dramatic expansion of rehabilitation services",

and, on page 5, that they want an increase in the number of addicts who are in treatment, I imagine that there might be a cost to that. When the Conservatives consider that we are already too highly taxed and that public services should be reduced, it is difficult to see how that could work.

Michelle Ballantyne: Will the member take an intervention?

John Mason: I am sorry, but I do not have time.

Labour suggests that preventative action should be a greater priority but, again, that means disinvestment somewhere else to pay for that.

Overall, I am glad that the Conservatives have brought the debate to the chamber today. It is good that we all acknowledge that there is a problem and that we can discuss it openly. "Rights, Respect and Recovery" broadly looks excellent, and I hope that we can all agree that we have some common ground on the issue.

16:22

Emma Harper (South Scotland) (SNP): It is always interesting to be one of the last speakers in the debate and to hear the contributions ahead. I have loads of scribbles on my notes, because I have written comments.

As a nurse, I have experience of working with people who require help to address their problematic use of alcohol and drugs. I also agree with Tom Arthur that many of us across the chamber will have direct experience and knowledge of people who have been problem users. It is a complex issue that requires a multi-team, key-partners, person-centred and patient-rights approach. I welcome the new strategy "Rights, Respect and Recovery", which aims to prevent and reduce alcohol and drug use, harm and related deaths.

I will focus on two aspects of the debate: social prescribing and safe consumption rooms. The Scottish Government's alcohol and drug treatment strategy—unlike the succinct proposal from the Tories—takes a person-centred approach whereby treatment and support services consider people's wider health and social needs, addressing issues such as mental health, employability and homelessness.

In the past 10 years, our understanding of the underlying causes of addiction and substance use disorders has changed and developed. The Scottish Government now recognises that deprivation, poverty, trauma and adverse childhood experiences can cause people to seek

alcohol and drugs, which can lead to problematic use. Although there are clear differences between the root causes and the response from services, they have too much in common to be kept apart. Treatment can no longer be just clinical but must also address the deep-rooted social and economic circumstances that people face.

It is fundamental that we address issues such as social isolation and stigma, which other members have mentioned, as those issues remain major barriers to recovery. Along with the introduction of minimum unit pricing of alcohol, the Scottish Government's renewed approach involves a range of measures to address problem use, which devastates lives, families and communities. Yesterday, I spoke to a former colleague who is a nurse specialist who supports people experiencing problem drug and alcohol use. She said, anecdotally, that minimum unit pricing is working. Her client cohort is consuming fewer of the higher-alcohol-content drinks that the minimum unit pricing strategy targets. I will welcome future evidence from the Government in which we see the numbers or the effects of that policy.

Rachael Hamilton (Ettrick, Roxburgh and Berwickshire) (Con): The member mentions the evidence that we will get on whether minimum unit pricing is leading people to lower their alcohol consumption levels. Does she agree that there should be clear, measurable targets for reducing the number of drug-related deaths?

Emma Harper: We are talking about people's lives. The first and ultimate goal is saving people's lives. People have a right to life; they also have the right to be supported through any healthcare problem. As I have said previously in the chamber, first and foremost, we need to stop treating drug users as criminals and instead look at illicit drug use as a public health issue. It is good to see that the Tories are finally catching up with the public health issue in their policy document. I welcome that.

However, in terms of the law on drug policy, as we heard, we are reliant on an out-of-touch UK Government making decisions on our behalf. I suggest that Tory members lobby for powers over drug laws to be devolved to the Scottish Parliament. As other members have said, drugs policy is a UK-wide issue, but the Scottish Government has the goal of addressing the issue and the use of 47-year-old laws really needs to be challenged.

Stuart McMillan: Michelle Ballantyne talked about having a whole-system mapping strategy. Would the devolution of powers in this area help with that approach?

Emma Harper: We need a plan for treating people that is based on the principles of rights and respect and that educates them about recovery or supports their recovery strategy. I would welcome the devolution of any powers to those ends.

We have 200 community and residential rehabilitation centres in Scotland. Although those centres can help, on average, 70 per cent of the people who come out of treatment revert to problem use within six months. I find those numbers challenging.

Earlier this year, I spoke at the opening of river garden, which is a centre run by Independence From Drugs and Alcohol Scotland. That recovery community is in Jeane Freeman's constituency, and I was interested to hear that Annie Wells has visited the centre. It applies a social prescribing approach to recovery that is based on the San Patrignano model. San Patrignano, in Italy, has one of the world's longest-running successful residential treatment centres. That model has been working for more than 39 years and achieves full recovery for persons through addiction support. I would welcome hearing the minister's thoughts on supporting social prescribing models such as the San Patrignano model that is used at river garden.

I would be happy to continue debating, but I realise that time is short. I support the Scottish Government's new strategy, and I reaffirm the SNP's calls for powers over drug policy to be devolved so that we can really take action, support our people and save lives.

16:28

Brian Whittle (South Scotland) (Con): Soon after starting in this place, I asked Addaction whether I could speak to some of its service users as part of my initial investigation into preventative health. That was a real lesson for me. Do not go into such meetings with preconceived ideas. I faced service users, seated in a horseshoe, who shot from the hip and did not miss. I appreciate that kind of approach. There was no sugar coating of issues—just straight-up, brutal reality. I have been back several times and, when inputting into the Scottish Conservative drug and alcohol strategy, I have tried to keep their words in mind. Addaction is one of several third sector agencies that I spoke to when writing this speech. I want to assure Monica Lennon specifically that what I have to say is a list of current issues and asks from it, rather than any attempt by me to come up with a speech. It is no use pretending that we understand the issues if we have not experienced the issues first hand.

Following on from what Jenny Marra and John Mason said, I think that the debate has been

positive in that the Scottish Government and the Scottish Conservatives have put ideas for tackling the crisis on the table. We will certainly not get everything right, but we will certainly not get everything wrong, so we should not dismiss every idea out of hand.

East Ayrshire is a mixture of towns and rural areas, and it happens to have experienced the biggest rise in drug deaths in Scotland over the past year. All the signs suggest that that trajectory is likely to be repeated this year, so whatever strategy is currently being deployed is not working. The third sector organisations on the front line have told me that they are being swamped, undervalued, underresourced and not listened to. I am told that there has been a huge rise in the number of cocaine users in the area and that that habit is driving people—especially young men—into debt. As well as contributing directly to the rise in drug deaths, that habit means that addicts as young as 18 are in hock to drug dealers for as much as £20,000 and are being coerced into dealing. With no apparent escape from that black hole, suicide becomes an option in their minds. Those are not my words; that is what I was told is the reality. Those are the people who are most likely to fall foul of the law, and it is their situation that should be viewed as a health issue. The people who sit behind them—the real dealers—are the ones who should feel the full force of the law.

Another issue is the fact that mental health services will not engage with people who are still using, so they are sent to third sector agencies to have their addiction tackled. Of course, the problem with that is that addiction agencies are generally not equipped to deal with complex mental health problems. Although they will not turn such cases away, in the absence of mental health interventions, the chances of a successful outcome are much reduced. Many of the cases that we are talking about involve people who are self-medicating because of previous trauma or poor mental health. Without multi-agency support for such individuals, plan conversion rates will be poor.

Even those who make it into the system are not getting the on-going support that is required to enable them to make a full recovery. I am told that addiction services generally generate prescriptions and that, all too often, that is where the help stops. I met a woman who had been on methadone for 23 years before she found out that it was even possible to come off it. Even then, she made that discovery only through a chance meeting with someone who had gone through the process.

Neil Findlay: I am listening carefully to what Mr Whittle is saying; it is a very good and highly informed speech. Does he agree that putting

people back into the criminal justice system is a backward step and that the approach that he is advocating sounds much more sensible? Will he have a word with his colleagues about that? We should be taking the approach that he is suggesting.

Brian Whittle: I thank Mr Findlay for his intervention. Of course cases of the kind that I have mentioned should be treated as a health issue, but it is inevitable that, in some cases, there will be an element of criminalisation. However, that is certainly not the first step that should be taken.

With peer support, the woman I mentioned had managed to get off methadone, had reignited a relationship with her daughter and was working again. I am told that healthcare professionals can be reluctant to reduce medication usage when it has enabled people to come off drugs and find a reasonable balance compared with where they had been, but that should not be the end of the journey. I believe that third sector involvement is crucial in supporting people in that situation, who are reducing their medication dependency in collaboration with medical interventions.

One of the big asks relates to the needle exchange programme. In East Ayrshire, there are very limited opportunities to access that service. Why are pharmacies that dispense methadone and other similar medication not equipped to provide that service? The rise in HIV and hepatitis C in Glasgow has been associated with the reduction in the needle exchange programme. Surely it is much more cost effective to prevent hepatitis C than it is to treat it. Hep C treatment costs around £10,000, and that is only if further internal damage to organs has not already occurred.

I see that I am approaching the end of my time. There have been many good speeches, but I think that Joan McAlpine devalued the debate through her feeble attempt to blame somewhere else for Scotland's crisis. What she said does not explain why Scotland's drug and alcohol death rate is two and a half times that of the rest of the UK.

Joan McAlpine: Will Brian Whittle take an intervention?

Brian Whittle: I have no time, and Joan McAlpine did not take my intervention.

We need to stop blaming somewhere else and start taking responsibility.

The Scottish Conservatives recognise that each individual situation is different, requiring a different set of solutions, be that medication, mental health support or social interventions by the NHS or the third sector. Early access to assessment allowing individuals to be signposted to appropriate services is essential.

16:35

Alex Neil (Airdrie and Shotts) (SNP): Annie Wells said that we have failed to deal with this problem for the past 10 years. I disagree with that; I think that we have collectively failed for the past 50 years. As Jenny Marra said, part of the reason for that is that, after all these years, we do not yet totally understand all the complexities of the causes of the problem or what the best way is to solve, or at least mitigate, the problem. That is where we all have to come together, learn from one another and listen to every strand of opinion, because nobody has a monopoly on the truth in this matter.

Many different ways of approaching the problem have been tried in the past 10 years and before that under successive Governments of the UK and the devolved Administration. When I came into this Parliament 19 years ago, the first committee that I sat on was the Social Justice Committee, which was convened by Margaret Curran. The first major inquiry that we did was on the problem of drug addiction, which we should go back and look at. A lot of our recommendations were implemented and some were not but, even with all those recommendations, we still have a major problem.

The statistics are interesting and we should not go by just one year. The number of people who are losing their lives as a result of drug addiction is appalling—none of us would say otherwise—but if we go way back to when the figures were first recorded, we see that the trend is continually upwards, irrespective of who has been in power and what has been happening elsewhere. The reality is that the numbers have been creeping up to the point at which, now, nearly 1,000 people a year are dying.

There is some indication that that number might be about to peak, because of the age profile of those people. I take the point about not describing them as “ageing” in the traditional sense, but their age profile suggests that the number might have peaked, particularly if we look at the decline in the number of deaths among under-25s. However, that does not in any way minimise the scale of the problem.

I hear many people asking why it is that Scotland has a bigger problem than the rest of the United Kingdom and the rest of Europe do. I refer people to the research that has been done by Sir Harry Burns on the biology of poverty and related issues. He has studied the issue of why, for example, Glasgow’s health record—not just drug addiction but mental and physical health problems—has been relatively so much worse than Liverpool’s, even though, on the face of it, Liverpool has suffered the same rundown in industry as Glasgow over the past 30, 40 or 50 years.

Neil Findlay: Will Alex Neil take an intervention?

Alex Neil: I will, in a minute.

Reading Harry Burns’s stuff is interesting, as there are reasons why Glasgow, in particular, and other parts of Scotland have not been as good at tackling these issues as comparable cities have been, or why they have had problems on a much bigger scale. There are reasons why that has happened.

Neil Findlay: I have read that research, which was interesting. However, Portugal, which had worse statistics than ours on infection rates and deaths, has turned that around significantly with a change in policy.

Alex Neil: We should study and learn from the policy change in Portugal and other countries. I am not making a constitutional point, but if we were going to take that approach in Scotland and did not have agreement with Westminster to do it across the whole of the UK, we would need the powers here to do it. That is not a constitutional point; it is just a practical point. I believe in experimentation and in piloting many more ways to tackle this problem. However, in some—although not all—cases, we would need the power to do that.

Brian Whittle *rose*—

The Presiding Officer (Ken Macintosh): Mr Neil, you will not get this time back.

Brian Whittle: Does Mr Neil’s rationale explain why East Ayrshire has the highest rise in drug deaths?

Alex Neil: Mr Whittle should go back and look at the Social Justice Committee report from 2000 that I referred to. We visited Cumnock and Aberdeen as part of our inquiry. Cumnock had never recovered from the closure of the coal industry, which destroyed a lot of lives, not just a lot of jobs. Cumnock is only beginning to recover from that now. There was a complete contrast between the problem in Cumnock, where it was clearly caused by a sense of hopelessness, and that in Aberdeen, where the issue was mainly about so-called recreational drug taking. It is complex; the problems in Cumnock and Aberdeen and reasons for them were completely different.

The Presiding Officer: Bring your remarks to a conclusion, Mr Neil.

Alex Neil: On this issue, we have to take a genuinely collective approach and try to get independent advice, but let us step on the accelerator. We are all agreed that this is a problem and we do not want to be here in 10 years discussing it under the same circumstances.

16:41

David Stewart (Highlands and Islands) (Lab):

This has been an excellent and well-informed debate, with passionate speeches being made from all round the chamber on new approaches to tackle Scotland's drug crisis. Miles Briggs should be praised for bringing the debate to Parliament. Although Labour members might not agree with all his submissions, our minds meet on the big picture, which is that Scotland has a troubled relationship with alcohol and drugs, that that culture is ruining the health and wellbeing of too many Scots, and that the range and scale of Scotland's substance misuse problem cannot be downplayed or forgotten.

Jenny Marra should be congratulated on the suggestion that we should all get our heads together to work out a strategy. We should do that on this side, as well. As my colleagues Monica Lennon, Neil Findlay and Jenny Marra made clear in their excellent speeches, the record levels of drug-related deaths are unacceptable. Scottish Labour is calling on the Scottish Government to face up to the crisis and to declare the situation a public health emergency. As we say in our amendment, we call on the Scottish Government to have a new strategy

"to reduce the number of drug-related deaths by 50% ... in line with the World Health Organization's Global Status Report",

and to reduce

"alcohol consumption in Scotland by at least 10% over the next 10 years".

The ghost at the feast in this debate is health inequality. Many members, including Alex Neil and Brian Whittle, mentioned that spectre. The "National Burden of Disease Report 2016" made it clear that drug use and alcohol dependence are major contributors to health inequality. Members will know that disadvantaged areas have double the rate of illness and early death that richer areas have. In our most deprived areas, drug-use disorders were the leading cause of disease in residents aged 15 to 44.

Some members rightly attempted to look to the future of drug use—the issues on the horizon that we should be concerned about, such as new psychoactive substances and prescribed medication. If we want lessons about the way forward, we can look at America and the horrors of the opiate crisis. When I was over there recently, I read that 90 per cent of the people who inject heroin started with ordinary prescriptions for opiates. It is a very frightening model. Other developments in the future will be image and performance-enhancing drugs, online supply and blood-borne virus transmissions, which have been mentioned by members.

For alcohol, we know the right direction: I concede to the Government that the quantity discount ban and irresponsible alcohol promotion ban are very sensible. I also believe in minimum unit pricing, but I will ask about a very specific point, so I give notice of that—I am always fair about that—to the minister. The minister will know from our previous discussions that the Sheffield modelling on MUP estimated a windfall of about £40 million a year to the alcohol industry. When will the Scottish Government introduce the regulations that will enact the social responsibility levy, which has been passed by Parliament? That could provide the funding to tackle alcohol abuse for hard-pushed health services and for third-sector organisations.

In the brief time that is available, I will summarise some points that were made in the debate. Miles Briggs was right to talk about the scale of drug abuse. It is a staggering figure—£3.5 billion is absolutely phenomenal. I also agree with him that we need to look at cross-portfolio work and to take an independent view of methadone. He also made the point about declaring a public health emergency. My colleague Monica Lennon gave some quite frightening statistics—the 15,000 substance-abuse deaths over the past 10 years, which she likened to the population of a small town. Her points about stigma were also well made.

Many members mentioned the importance of safe consumption facilities in Glasgow, which our amendment makes clear we strongly support.

Alison Johnstone, as always, made a well-informed speech. She emphasised the point about an overarching strategy and prevention being key. However, one of the main points that came out of her speech was that there has been a 200 per cent increase in drug deaths among women.

Alex Cole-Hamilton gave a thoughtful speech, from which one particular point that jumped out at me was the 23 per cent cut in ADP funding. He also made an extremely good and innovative point about foetal alcohol spectrum disorder.

Liam Kerr made some good points about taking an innovative approach and about a commission, and Joan McAlpine used a useful quotation to say that we cannot arrest or punish our way out of Scotland's drug problems. That was a very good quote.

I was impressed by Neil Findlay's powerful speech. He has great knowledge in this area and he talked about people being "collateral damage", the enhancement of the criminal network that can happen, the fact that

"The streets are awash with cannabis and cocaine",

and that the last place a person needs to be when they have an addiction of any sort is in prison.

I am conscious of time, Presiding Officer, so I shall move quickly to my conclusion. I thank the minister for publishing the new alcohol and drug use strategy this morning, and I welcome the Scottish Government's move towards recovery-orientated care. I also want to touch on the point that some members made that we should normalise the issue, because every member will know someone who is dealing with an addiction challenge. It touches so many lives, because so many people suffer from addiction.

I was struck by a quote that I discovered this morning by a recovering addict who is probably well known to everyone—Russell Brand. He said:

“The mentality and behavior of drug addicts and alcoholics is wholly irrational until you understand that they are completely powerless over their addiction and unless they have structured help they have no hope.”

16:48

Joe FitzPatrick: I welcome the range of views that we have heard today from across the chamber. It has been a good debate. I know that there was a point when we were all a bit heated, which is never good—especially when we are talking about a subject such as this. However, in the main it has been a good debate that has clearly captured just how emotive and important the issue is to people in the chamber, just as it is to people in communities across Scotland.

Despite the many different opinions that have been aired today, I know that we all agree that we want a reduction in the harms that are associated with alcohol. Points that have been raised highlighted some of the complexities. As a country, we face those complexities in trying to tackle the many and varied challenges that are associated with high-risk drug and alcohol use.

We are short of time, but I will try to cover as many as possible of the points that were made. Miles Briggs, Monica Lennon and a few other members talked about the call to declare a public health emergency. I would like to take a moment to say where that came from.

The idea originated in British Columbia, where the provincial Government declared a public health emergency that resulted in the federal Government having to take action. That was very much about the support that was needed for safe consumption spaces, which we are considering. If I could stand here and declare a public health emergency and thereby make the UK Government change the drug laws to allow Glasgow to proceed with the safe consumption space, which we know would save lives, I would do it. Unfortunately, there is no meaning to the phrase in Scotland.

However, I absolutely accept and recognise that the level of deaths is a public health priority and that it is absolutely unacceptable. Every one of those deaths is avoidable, so we need to work together to address that.

Monica Lennon: I am grateful to the minister for giving way. I cannot think of a word other than “emergency”. We ask in our amendment for a public health emergency to be declared so that the full force of Government could act. It is not about blaming the Government. As we have heard from other members, ADPs and the structures around them are not all about money; they are also about governance, transparency and accountability to our communities. We cannot afford more people dying. Calling for a public health emergency to be declared is not a slogan; it is a genuine attempt to make sure that every part of Government, local government and public spend is completely focused. I give the minister and the rest of the Government front bench our commitment that if such a declaration were to be made, they would have our full support.

Joe FitzPatrick: We must absolutely use the full force of Government to address this public health priority. That is what we need to do.

I had better make some progress, because a number of other points were made in the debate.

Early in the debate—I do not know whether it was during Mr Briggs's speech or Monica Lennon's speech—there was criticism of the Labour Party for not having produced a strategy. I put on the record that when I published the draft strategy it was for consultation of everybody. I shared it with all the spokespeople and stakeholders across Scotland. I confirm that Monica Lennon was one of the people who came back to us with suggestions, which we have addressed as part of the strategy. This strategy is not my strategy; it is Scotland's strategy. It was pulled together with input from stakeholders across Scotland, including members in the chamber.

Miles Briggs: Today's debate has shown that the Government's strategy, which was published today, can be improved. We have brought ideas. Two specific ideas that I would like to be included are a review of all drug-related deaths and targets being attached to the strategy. There are no targets in the current strategy. We want that. Will the minister do cross-party work to make sure that that happens?

Joe FitzPatrick: The strategy specifically includes a section on evaluation and review. That is really important—it is not just about having a strategy; it is also about making sure that it works.

I thought carefully about targets. Dave Stewart suggested that the two targets in the Labour

amendment are WHO targets. That is not exactly true; the first target on drug deaths is not, but the second target on alcohol is. It is a reasonable point that we should look at.

I feel very uncomfortable about setting a target for what we think would be an acceptable number of people to die. My view is that every single death is unacceptable.

David Stewart: Will the minister give way?

Joe FitzPatrick: I need to make progress. There are a number of points to cover.

I feel very uncomfortable about setting such a target because every one of these deaths is avoidable. We should do everything that we can to work together. It would be easy for me to set a target that in 10 years there would be no deaths, but I really care about the matter and am concerned that setting a target would not send the right message. However, I understand the points that are being made, and why members are asking for targets.

Jenny Marra: Will the minister outline how we will work together? I suggested in my speech that we would all be prepared to come together in a cross-party way on this emergency. Will he outline exactly how that will work?

Joe FitzPatrick: There has already been a large degree of collaboration in getting to this point. There will be further documents, such as our delivery strategy. We will be working with stakeholders that provide services across Scotland.

Maurice Corry (West Scotland) (Con): Will the minister take an intervention?

Joe FitzPatrick: No—I have to make progress.

If people have suggestions on how we might do that, I will be happy to have such discussions, because this really matters.

Some important issues have been raised during the debate. Neil Findlay mentioned the changes that have been made in Portugal. We can definitely learn lessons from those changes, but we need a UK Government that is prepared to view drug and alcohol abuse in the context of public health, or it needs to give this Parliament those powers. Recently, I met my opposite number in Westminster. I was really disappointed that that minister would not see the issue in a public health context; she was able to see it only in the justice context.

Maurice Corry: Will the member take an intervention?

Joe FitzPatrick: I need to finish.

I reiterate my earlier point that improving how we support people who are affected by drugs and alcohol requires a concerted approach—not just by alcohol and drug services or wider health and social care services, but by people, services and organisations across the whole of society. My challenge to Parliament today is that members give their support to the new strategy and the new approach—an approach that places health and person-centred services at the heart of treating the harms from drugs and alcohol that cause misery to so many people across Scotland.

16:56

Adam Tomkins (Glasgow) (Con): I am very proud that we have talked about this issue in Conservative Party time. As the minister said, the debate has been heated at times, but members across the chamber have made genuinely valuable and constructive speeches. I thank every member who has taken part in the debate.

Often in politics, we have to speak about issues that we wish we knew a little more about, but not this afternoon. Today's proceedings have been peppered with speeches from members across the chamber who plainly wish that they did not know as much about the issue—the deaths, the pain and the destruction that drug and alcohol addiction continue to cause every day in Scotland—as they do. This is an area in which none of us has all the answers, but in which all of us have something to say.

The starting point needs to be an honest and robust appraisal of the road to recovery approach, which was set out a decade ago. In 2007, a little more than a decade ago, there were 52,000 problem drug users in Scotland; there are now 61,500 problem drug users in Scotland. In 2007, there were 455 drug-related deaths in Scotland; the number has risen to nearly 1,000 deaths per year. That is two and a half times the UK average and it is the worst rate in Europe. Methadone is present in nearly half of those deaths.

The word “crisis” is often overused in politics, but this is a crisis—it is a public health emergency. We must be honest about the failure of the policy that has led us to this point and we must be robust about the remedies that we need to move on. In her opening speech, Monica Lennon said that it is not just a refresh of the policy that is required, and I agree with her. As Alex Neil said, the statistics are appalling, and we should be appalled by them, notwithstanding the tragic fact that they are so often repeated. As Alex Cole-Hamilton said, despite record deaths, the on-going cuts in alcohol and drug partnership funding—the most recent cut being £1.5 million from 2016-17 to 2017-18—do not exactly help.

What would the Scottish Conservatives do? Earlier this week, we set out our strategy for beginning to tackle some of the problems. Our strategy starts by recognising that drugs policy needs to tackle addiction at source. It needs to dig deep and understand the relationship between addiction and mental health, family breakdown and adverse childhood experiences. If that is what a public health approach to drugs policy means, I fully support it.

However, I reject the false antithesis in which we have to choose between drugs policy being either a public health issue or a criminal justice issue. We cannot afford to ignore the role that criminal justice must play in this system, given that, as John Scott pointed out in an intervention, some 90 per cent of offenders arriving at jail in Scotland come with addiction problems. Indeed, the opening proposal in the strategy that we have published this week, which is to pilot local commissions, seeks to address precisely that point. We need a holistic approach to addiction policy that joins up public health and criminal justice elements.

Joe FitzPatrick: The member has mentioned justice and public health approaches. Does he accept that a policy that will save lives, such as the safer consumption space, is a public health approach that should be supported? Will he call on his Westminster colleagues to allow us to put that in place either by changing the law there or by giving us the powers to do so? [*Interruption.*]

The Presiding Officer: I must ask colleagues to keep their conversations down, please.

Adam Tomkins: The answer to the minister's question is no. I want to get people off drugs, not make it easier for people to take them. It is a step down the road to decriminalisation and therefore a step in completely the wrong direction, and I will not support it, not for Glasgow nor for any other city in Scotland.

The second proposal in our strategy published this week is for an urgent and fully independent review of the use of methadone in Scotland. Eight thousand drug users in Scotland have been on methadone for more than five years and it was present in nearly half of all drug-related deaths in Scotland last year. Whatever is happening with methadone across Scotland, it is not working. Keeping people on a drug substitute does not help them to beat their addiction, and substituting illicit drugs with prescription drugs such as methadone does not deal with the problem—it merely delays it.

The third proposal is for a redirection of funds into rehabilitation, recovery and abstinence. As Jenny Marra said twice during the debate, it is not all about money; money is, of course, important,

but the issue is also how that money is spent. We need a dramatic increase in rehab services to deliver additional capacity and placements.

On a point of what is, for me, consensus, I should say that I welcome the comments in this regard that have been made in the Scottish Government's strategy, which was published earlier this morning. Unlike the draft that was circulated a few weeks ago, the document published today talks honestly about the importance of recovery. It says:

"Recovery is clearly a journey for people away from the harm and the problems which they experience, towards a healthier and more fulfilling life. In this context, we need to continue to develop recovery oriented systems of care across Scotland."

I welcome those comments, and I think that they are very important, but I want to push the minister a little bit further and ask him to explain exactly what policies contained in the document—or anywhere else—the Scottish Government will use to deliver on those aspirations. It is all rather lofty, and it points in the right direction, but we need concrete action on this now.

Finally, the strategy that we published this week says that it should be measured against two clear and ambitious but realisable targets: first, to halve within five years the number of drug deaths in Scotland; and secondly, to increase the number of problem drug users accessing treatment from the 40 per cent that it is in Scotland at the moment to 60 per cent, which is the figure elsewhere in the United Kingdom. The draft drugs strategy that the Scottish Government circulated in September showed a startling lack of ambition for people with addiction. Instead of helping people to move beyond their addiction, it focused only on managing it, perpetuating what for some is a disastrous state-sponsored dependency that can last for years, even decades. Drug users do not need a drugs plan to help them manage their addiction; they need a life plan to help them end their addiction.

Every problem drug user can be brought off drugs and supported back into a functioning lifestyle. That is the standard against which drugs or addiction strategy should be measured. The Scottish Government strategy that was published today is an improvement on the draft published a few months ago, but work remains to be done to make it truly fit for purpose.

Business Motions

17:04

The Presiding Officer (Ken Macintosh): The next item of business is consideration of business motion S5M-14958, in the name of Graeme Dey, on behalf of the Parliamentary Bureau, setting out a business programme.

Motion moved,

That the Parliament agrees—

(a) the following programme of business—

Tuesday 4 December 2018

2.00 pm Time for Reflection

followed by Parliamentary Bureau Motions

followed by Topical Questions (if selected)

followed by Public Petitions Committee debate: PE1463 on thyroid and adrenal testing, diagnosis and treatment

followed by Scottish Government Debate: A Strategy for our Veterans – taking it forward in Scotland

followed by Counter-Terrorism and Border Security Bill (UK Legislation)

followed by Committee Announcements

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Wednesday 5 December 2018

2.00 pm Parliamentary Bureau Motions

2.00 pm Portfolio Questions
Education and Skills

followed by Scottish Government Debate: Protecting Our Interests: Scotland's Response to the UK Government and EU's Withdrawal Agreement and Political Declaration

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Thursday 6 December 2018

11.40 am Parliamentary Bureau Motions

11.40 am General Questions

12.00 pm First Minister's Questions

followed by Members' Business

2.30 pm Parliamentary Bureau Motions

2.30 pm Stage 1 Debate: Health and Care (Staffing) (Scotland) Bill

followed by Financial Resolution - Health and Care (Staffing) (Scotland) Bill

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

Tuesday 11 December 2018

2.00 pm Time for Reflection

followed by Parliamentary Bureau Motions

followed by Topical Questions (if selected)

followed by Scottish Government Business

followed by Committee Announcements

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Wednesday 12 December 2018

2.00 pm Parliamentary Bureau Motions

2.00 pm Portfolio Questions
Health and Sport

followed by Scottish Government Business

followed by Final Stage Proceedings: Pow of Inchaffray Drainage Commission (Scotland) Bill

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Thursday 13 December 2018

11.40 am Parliamentary Bureau Motions

11.40 am General Questions

12.00 pm First Minister's Questions

followed by Members' Business

2.00 pm Parliamentary Bureau Motions

2.00 pm Scottish Government Debate

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

(b) that, in relation to any debate on a business motion setting out a business programme taken on Wednesday 5 December 2018, the second sentence of rule 8.11.3 is suspended and replaced with "Any Member may speak on the motion at the discretion of the Presiding Officer", and

(c) that, in relation to First Minister's Questions on Thursday 6 December 2018, in rule 13.6.2, insert at end "and may provide an opportunity for Party Leaders or their representatives to question the First Minister".—[*Graeme Dey*]

Motion agreed to.

The Presiding Officer: The next item of business is consideration of business motion S5M-

14959, in the name of Graeme Dey, on the timetable of a bill at stage 2.

Motion moved,

That the Parliament agrees that consideration of the Age of Criminal Responsibility (Scotland) Bill at stage 2 be completed by 1 February 2019.—[*Graeme Dey*]

Motion agreed to.

Parliamentary Bureau Motions

17:05

The Presiding Officer (Ken Macintosh): The next item of business is consideration of two Parliamentary Bureau motions. I ask Graeme Dey, on behalf of the Parliamentary Bureau, to move motion S5M-14960, on the size of a committee, and motion S5M-14981, on committee meeting times.

Motions moved,

That the Parliament agrees, further to motion S5M-13781 in the name of Graeme Dey, that the size of the Environment, Climate Change and Land Reform Committee be reduced from 9 to 7 members.

That the Parliament agrees that, under Rule 12.3.3B of Standing Orders, the Finance and Constitution Committee and the Culture, Tourism, Europe and External Affairs Committee can meet jointly during the afternoon meeting of the Parliament after First Minister's Questions on Thursday 29 November 2018 for the purpose of considering business arising from the UK's exit from the European Union.—[*Graeme Dey*]

Decision Time

17:05

The Presiding Officer (Ken Macintosh): We come now to decision time. I remind members that, if the amendment in the name of Joe FitzPatrick is agreed to, the amendment in the name of Monica Lennon will fall.

The first question is, that amendment S5M-14914.2, in the name of Joe FitzPatrick, which seeks to amend motion S5M-14914, in the name of Miles Briggs, on a new approach needed to tackle Scotland's drugs crisis, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

Adam, George (Paisley) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Baker, Claire (Mid Scotland and Fife) (Lab)
 Beamish, Claudia (South Scotland) (Lab)
 Bibby, Neil (West Scotland) (Lab)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Campbell, Aileen (Clydesdale) (SNP)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Crawford, Bruce (Stirling) (SNP)
 Cunningham, Roseanna (Perthshire South and Kinross-shire) (SNP)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dornan, James (Glasgow Cathcart) (SNP)
 Dugdale, Kezia (Lothian) (Lab)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fabiani, Linda (East Kilbride) (SNP)
 Fee, Mary (West Scotland) (Lab)
 Findlay, Neil (Lothian) (Lab)
 Finnie, John (Highlands and Islands) (Green)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Freeman, Jeane (Carrick, Cumnock and Doon Valley) (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, Iain (East Lothian) (Lab)
 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)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Johnstone, Alison (Lothian) (Green)
 Kelly, James (Glasgow) (Lab)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lamont, Johann (Glasgow) (Lab)
 Lennon, Monica (Central Scotland) (Lab)
 Leonard, Richard (Central Scotland) (Lab)

Lochhead, Richard (Moray) (SNP)
 Lyle, Richard (Uddingston and Bellshill) (SNP)
 MacDonald, Angus (Falkirk East) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 Macdonald, Lewis (North East Scotland) (Lab)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Derek (Renfrewshire North and West) (SNP)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Marra, Jenny (North East Scotland) (Lab)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAlpine, Joan (South Scotland) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 McNeill, Pauline (Glasgow) (Lab)
 Neil, Alex (Airdrie and Shotts) (SNP)
 Paterson, Gil (Clydebank and Milngavie) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Ross, Gail (Caithness, Sutherland and Ross) (SNP)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Russell, Michael (Argyll and Bute) (SNP)
 Sarwar, Anas (Glasgow) (Lab)
 Smith, Elaine (Central Scotland) (Lab)
 Smyth, Colin (South Scotland) (Lab)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Stewart (Banffshire and Buchan Coast) (SNP)
 Stewart, David (Highlands and Islands) (Lab)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Todd, Maree (Highlands and Islands) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Watt, Maureen (Aberdeen South and North Kincardine) (SNP)
 Wheelhouse, Paul (South Scotland) (SNP)
 White, Sandra (Glasgow Kelvin) (SNP)
 Wightman, Andy (Lothian) (Green)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

Ballantyne, Michelle (South Scotland) (Con)
 Bowman, Bill (North East Scotland) (Con)
 Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Chapman, Peter (North East Scotland) (Con)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Corry, Maurice (West Scotland) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Golden, Maurice (West Scotland) (Con)
 Greene, Jamie (West Scotland) (Con)
 Halcro Johnston, Jamie (Highlands and Islands) (Con)
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)
 Harris, Alison (Central Scotland) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Lindhurst, Gordon (Lothian) (Con)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Mason, Tom (North East Scotland) (Con)
 McArthur, Liam (Orkney Islands) (LD)
 Mitchell, Margaret (Central Scotland) (Con)
 Mountain, Edward (Highlands and Islands) (Con)
 Mundell, Oliver (Dumfriesshire) (Con)
 Rennie, Willie (North East Fife) (LD)
 Scott, John (Ayr) (Con)
 Scott, Tavish (Shetland Islands) (LD)
 Simpson, Graham (Central Scotland) (Con)

Smith, Liz (Mid Scotland and Fife) (Con)
 Stewart, Alexander (Mid Scotland and Fife) (Con)
 Tomkins, Adam (Glasgow) (Con)
 Wells, Annie (Glasgow) (Con)
 Whittle, Brian (South Scotland) (Con)

The Presiding Officer: The result of the division is: For 85, Against 32, Abstentions 0.

Amendment agreed to.

The Presiding Officer: The amendment in the name of Monica Lennon therefore falls.

The next question is, that motion S5M-14914, in the name of Miles Briggs, on a new approach needed to tackle Scotland's drugs crisis, as amended, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

Adam, George (Paisley) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Baker, Claire (Mid Scotland and Fife) (Lab)
 Beamish, Claudia (South Scotland) (Lab)
 Bibby, Neil (West Scotland) (Lab)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Campbell, Aileen (Clydesdale) (SNP)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Constance, Angela (Almond Valley) (SNP)
 Crawford, Bruce (Stirling) (SNP)
 Cunningham, Roseanna (Perthshire South and Kinrossshire) (SNP)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dornan, James (Glasgow Cathcart) (SNP)
 Dugdale, Kezia (Lothian) (Lab)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fabiani, Linda (East Kilbride) (SNP)
 Fee, Mary (West Scotland) (Lab)
 Findlay, Neil (Lothian) (Lab)
 Finnie, John (Highlands and Islands) (Green)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Freeman, Jeane (Carrick, Cumnock and Doon Valley) (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, Iain (East Lothian) (Lab)
 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)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Johnstone, Alison (Lothian) (Green)
 Kelly, James (Glasgow) (Lab)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lamont, Johann (Glasgow) (Lab)
 Lennon, Monica (Central Scotland) (Lab)
 Leonard, Richard (Central Scotland) (Lab)
 Lochhead, Richard (Moray) (SNP)

Lyle, Richard (Uddingston and Bellshill) (SNP)
 MacDonald, Angus (Falkirk East) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 Macdonald, Lewis (North East Scotland) (Lab)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Derek (Renfrewshire North and West) (SNP)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Marra, Jenny (North East Scotland) (Lab)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAlpine, Joan (South Scotland) (SNP)
 McArthur, Liam (Orkney Islands) (LD)
 McKee, Ivan (Glasgow Provan) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 McNeill, Pauline (Glasgow) (Lab)
 Neil, Alex (Airdrie and Shotts) (SNP)
 Paterson, Gil (Clydebank and Milngavie) (SNP)
 Rennie, Willie (North East Fife) (LD)
 Robison, Shona (Dundee City East) (SNP)
 Ross, Gail (Caithness, Sutherland and Ross) (SNP)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Russell, Michael (Argyll and Bute) (SNP)
 Sarwar, Anas (Glasgow) (Lab)
 Scott, Tavish (Shetland Islands) (LD)
 Smith, Elaine (Central Scotland) (Lab)
 Smyth, Colin (South Scotland) (Lab)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Stewart (Banffshire and Buchan Coast) (SNP)
 Stewart, David (Highlands and Islands) (Lab)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Todd, Maree (Highlands and Islands) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Watt, Maureen (Aberdeen South and North Kincardine) (SNP)
 Wheelhouse, Paul (South Scotland) (SNP)
 White, Sandra (Glasgow Kelvin) (SNP)
 Wightman, Andy (Lothian) (Green)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

Ballantyne, Michelle (South Scotland) (Con)
 Bowman, Bill (North East Scotland) (Con)
 Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Chapman, Peter (North East Scotland) (Con)
 Corry, Maurice (West Scotland) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Golden, Maurice (West Scotland) (Con)
 Greene, Jamie (West Scotland) (Con)
 Halcro Johnston, Jamie (Highlands and Islands) (Con)
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)
 Harris, Alison (Central Scotland) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Lindhurst, Gordon (Lothian) (Con)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Mason, Tom (North East Scotland) (Con)
 Mitchell, Margaret (Central Scotland) (Con)
 Mountain, Edward (Highlands and Islands) (Con)
 Mundell, Oliver (Dumfriesshire) (Con)
 Scott, John (Ayr) (Con)
 Simpson, Graham (Central Scotland) (Con)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Stewart, Alexander (Mid Scotland and Fife) (Con)

Tomkins, Adam (Glasgow) (Con)
 Wells, Annie (Glasgow) (Con)
 Whittle, Brian (South Scotland) (Con)

The Presiding Officer: The result of the division is: For 89, Against 28, Abstentions 0.

Motion, as amended, agreed to,

That the Parliament recognises the public health crisis related to the harm associated with the use of opiates and/or benzodiazepines and other drugs; further recognises that the harm has increased since 2007, with 934 fatalities recorded in 2017; believes that Scotland needs a drug and alcohol strategy founded on the principles of rights, recovery and respect, and which places public health at its heart and does not stigmatise those seeking recovery or harm reduction, and calls on the UK Government to make the necessary changes to the Misuse of Drugs Act 1971 to allow the creation of a medically supervised safe consumption facility in Glasgow, or empower the Scottish Parliament to do so.

The Presiding Officer: The next question is, that motion S5M-14960, in the name of Graeme Dey, on behalf of the Parliamentary Bureau, on the size of a committee, be agreed to.

Motion agreed to,

That the Parliament agrees, further to motion S5M-13781 in the name of Graeme Dey, that the size of the Environment, Climate Change and Land Reform Committee be reduced from 9 to 7 members.

The Presiding Officer: The final question is, that motion S5M-14981, in the name of Graeme Dey, on behalf of the Parliamentary Bureau, on committee meeting times, be agreed to.

Motion agreed to,

That the Parliament agrees that, under Rule 12.3.3B of Standing Orders, the Finance and Constitution Committee and the Culture, Tourism, Europe and External Affairs Committee can meet jointly during the afternoon meeting of the Parliament after First Minister's Questions on Thursday 29 November 2018 for the purpose of considering business arising from the UK's exit from the European Union.

Bank of Scotland (Branch Closures)

The Deputy Presiding Officer (Linda Fabiani): The final item of business is a members' business debate on motion S5M-14782, in the name of Sandra White, on planned Bank of Scotland branch closures. The debate will be concluded without any question being put.

Motion debated,

That the Parliament condemns the Bank of Scotland's intention to close seven branches across the country; understands that thousands of Bank of Scotland customers who depend on branches in Burnside, Dundee, Keith, Kirriemuir, Lossiemouth, Paisley, Stonehouse and Glasgow St George's Cross in the Glasgow Kelvin constituency will be negatively affected by the closures; considers that there is a need for a continued face-to-face banking service in local communities for those who remain reliant on high street branches, and believes that national banks have a duty to fully consult their customers before making such critical decisions.

17:09

Sandra White (Glasgow Kelvin) (SNP): I thank all members who have supported my motion and enabled a debate on the very important subject of planned Bank of Scotland branch closures.

I note that Neil Findlay lodged a question regarding bank closures last year and that there was a members' business debate on the closures in December 2017, which was led by Kate Forbes, who is now the Minister for Public Finance and Digital Economy. We should take note of the Scottish Government's response to Neil Findlay's question. It stated:

"banks should commit to work with the local communities they serve to establish a range of delivery channels that best meets the needs of their customers, including access to local, physical banking services".—[*Written Answers*, 2 May 2018; S5W-16023.]

Here we are, nearly a year on from the previous debate, facing more bank branch closures. Banks continue to renege on their commitment to meet the needs of local communities, including the business sector.

I will read out an email from one of my constituents, which sets out exactly how the closure of the Bank of Scotland branch at St George's Cross, in my constituency, affects that community and the areas beyond. I will not say the person's name, but I will read their email. My constituent says:

"I am emailing you in regards to the Bank of Scotland's decision to close it's branch at St George's Cross. I find it very worrying that this closure will have a serious impact on the elderly and infirm and also local businesses. We are now in a position of not having a local Bank of Scotland from areas Bearsden, Torrance, Milton, Possilpark,

Kelvindale, Kelvinbridge, Anniesland, Maryhill and Cowcaddens.”

That is quite a wide area. My constituent continues:

“The nearest bank branch will now be in the city centre. I am just wondering if you and your parliamentary colleagues would be willing to use your parliamentary influence to approach the Bank of Scotland in an effort to reverse their disgraceful decision to deprive the good people of Maryhill and beyond of a much needed and loved branch.”

I have replied to my constituent, making him aware that this debate is taking place. Perhaps the minister will follow up my constituent’s request and contact the Bank of Scotland on the issues that he has raised.

I received information from the Bank of Scotland, indicating the nearest branch following the closure of the St George’s Cross branch. Customers will now need to do their banking in person at the Byres Road branch, the Sauchiehall Street branch or the Argyle Street branch. Those branches are quite a distance away for an elderly or infirm person. In addition, the bank advocates the use of a Spar shop in Maryhill, a Day Today store in St George’s Road and a Nisa store on the Great Western Road.

That is simply not good enough. The bank is not serving local communities—particularly the frail and elderly, as I have said—or small and medium-sized businesses in my constituency, many of which rely on local banking facilities to bank their takings or change moneys.

Graeme Dey (Angus South) (SNP): The Bank of Scotland closed its Carnoustie branch, in my constituency, a little while back despite the fact that 47 per cent of its personal customers used no other bank and had no alternative means of banking. Some 45 per cent of the customers of the Kirriemuir branch, which is also in my constituency and which serves a rather large rural hinterland, use no other branch, and that branch is also under threat. Does Sandra White agree that the evidence from Angus suggests that the Bank of Scotland cares very little about the needs of its customers?

Sandra White: I absolutely concur with what my colleague has said and with what many others have said in emails that I have received, in phone calls and on visits to my constituency office. I think that the situation is much worse in Angus and other outlying areas, and I am sure that we will hear about that from members as they contribute to the debate.

Mention of local people and local businesses relying on banking facilities to bank their takings or change money takes me on to another issue. I do not know whether many members know about the use of white spaces in shops to supply some

banking services but not all of them. That is a very worrying trend, and it is particularly problematic for those who use card accounts. Lots of people use card accounts to pay their rent and bills, but the white spaces that are starting to be created in local shops do not necessarily deal with card accounts. The situation has to be looked at, as card accounts are a lifeline for a lot of people and the only way that they can pay their bills. The issue has been raised with me quite often in connection with renting social housing from housing associations.

There is also a knock-on effect on post offices from banks closing. I know that that issue has been raised by a number of other members, as well as at Westminster.

Clare Haughey (Rutherglen) (SNP): It has been announced that the Burnside branch, in my constituency, is also closing. In addition, all the branches in Blantyre and Cambuslang have been closed. The consistent theme from the banks when they are closing is that people can go to post offices. Does the member agree that that is not a suitable alternative given that post offices are often at the back of shops, that there is a lack of privacy that causes concern, particularly among elderly people who go in to lift their pension or substantial sums of money, and that post offices do not provide the services that banks do?

Sandra White: Again, I concur with my colleague’s point. Branch closures mean not just a lack of personal banking but, as I will explain, a knock-on effect for post offices. There is certainly a knock-on effect for businesses that cannot leave money on their premises overnight.

It is worrying that post offices are being used as a substitute for banks, but post offices are being utilised more and more as branch closures take their toll. Those post offices are doing a fantastic job, some of them in very deprived areas where banks have closed and they are the only means whereby people can pay bills or get money out. However, the post offices and the banks are not being treated equally. That point has been made by the National Federation of SubPostmasters, which I have met and on whose behalf I will host an event in the Parliament. The sub-postmaster now gets less money when someone deposits money with a post office instead of with a bank.

The most worrying aspect of the inequality is the cost of operating ATMs. Banks and building societies are exempt from rates for ATMs, but post offices are not. They are required to pay the rates, and those costs are increasing. A real fear that I have heard from sub-postmasters and others is that post offices, which are becoming a lifeline for our communities, will not survive, because of a lack of support and moneys and because of increasing charges. What will happen then? The

banks have a moral responsibility to look at the knock-on effect that they are having on post offices. I know that the issue has been raised at Westminster by colleagues there.

This is a very worrying time, because people should be able to access their banks in person. Not everybody does internet banking. I do not do it, because I like to talk to somebody in person, or I will phone. Many people do not like internet banking, and many do not even have access to a computer on which to do internet banking.

The bank closures are having a huge knock-on effect on communities and local businesses. For example, there are loads of small and medium-sized enterprises in my area that cannot bank their money and have to find a post office to deposit it in.

I hope that, in her summing up, the minister will answer some of the questions that have been raised by me and colleagues, and I hope that she will raise them with the banking industry. The banks have a social responsibility to the people they serve—businesses and local communities—and they should recognise that.

The Deputy Presiding Officer: We move to the open debate, with speeches of up to four minutes, please.

17:18

Jamie Halcro Johnston (Highlands and Islands) (Con): I thank Sandra White for bringing the debate to the chamber.

Although the bank branch network has been in decline for some time, it has become clear in recent years that the closing of branches has gained pace. That has left us in a position in which the very future of branch-based banking services is under threat. Those services are still utilised by a significant cross-section of our constituents, but we are potentially looking at a future, envisaged by our major banks, in which a truly nationwide branch network, covering small towns and villages like those that many of us represent, is no longer considered to be in their economic interest. What a future scaled-down network will look like and how banking services will continue to be offered to customers is still unclear.

Two of the branches affected—they are mentioned in the motion—are located in my region of the Highlands and Islands, in Keith and Lossiemouth. Both are relatively substantial settlements in Moray and maintain a range of businesses that might not be found in similarly sized towns in the central belt, but both are losing their Bank of Scotland branches, and the Bank of Scotland is removing the ATMs, too. The Bank of Scotland branch in Lossiemouth is the last

remaining bank in that town, and the decision to close it comes at a time when the RAF is making a major investment in Lossiemouth—an investment that will bring hundreds of new residents, families and businesses to the town; but there will be no bank.

Richard Lochhead (Moray) (SNP): I thank the member for generously giving way and for raising the subject of the proposed bank closures in my constituency, in Keith and Lossiemouth. I am sure that he is aware that Moray has lost 40 per cent of its high street bank branches in the past eight years and that there is a lot of anger about the proposals for Keith and Lossiemouth.

Does the member agree that, in the case of Lossiemouth in particular, where there is a proposal to shut the last bank in the community—with all the damage that that will inflict on the local community—extra safeguards should be put in place by the banks themselves or, if need be, by United Kingdom Government regulation to prevent that from happening?

Jamie Halcro Johnston: I thank the member for that intervention. We have discussed that idea at the Economy, Energy and Fair Work Committee, and we covered it during our inquiry on the impact of bank closures. We recognised not only that a particular view needs to be taken when it is the last bank in town but that there needs to be recognition of the particular impact that such closures can have in communities in areas such as the Highlands and Islands, where banks can be spread far apart.

That is the story of the Highlands and Islands. Our geography has meant that local residents are more dependent than most in Scotland on these small towns and the services that they provide. Although closures are a national trend, it is locally that the impact is most keenly felt. The two proposed closures in Moray have received objections from the local community, and my colleague Douglas Ross MP has organised public meetings in both towns to put residents' concerns to the Bank of Scotland.

The meetings were attended by representatives from Moray Council, from local community councils, from the Post Office and from local business organisations including the Lossiemouth Business Association and the Federation of Small Businesses. However, they were not attended by representatives of the Bank of Scotland, who were empty-chaired at both meetings.

It would be unreasonable not to acknowledge that the greatest proportion of branch closures has not been in the Highlands and Islands. That was among the findings of the committee's inquiry on the subject, and I do not dispute it. However, as I have said, the geography of the region means that

closures can have a disproportionate effect. In many cases, the nearest alternatives are often more distant and less accessible, particularly by public transport.

Highlands and Islands Enterprise found a significant increase in the use of mobile and online transactions, as the report it commissioned on access to banking services sets out. Many banks have expanded the scope of their remote banking options in recent years—for example, allowing cheques to be paid in online—and that is to be commended. However, as the HIE report notes, such access is dependent on strong connectivity, which, in many parts of my region, is simply absent.

That is partly why cash transactions remain more common, particularly in the context of the region's many small and medium-sized enterprises; yet, as I said, it is unclear how residents are expected to adapt. Although adopting the lessons of digital inclusion will be key, there is still a role for branch-based banking. One commonly heard issue is to do with the use of post offices for banking services. As many constituents tell us, the post office network itself has declined, which can present a particular problem for island communities, from whom even a cash machine can be distant.

The committee's findings extended to a number of barriers to the Post Office simply taking over wholesale the role of branch banking. Banking hubs also present a mixture of benefits and challenges, but they potentially integrate better with other community facilities.

The reality is that significant reductions in the banking services that are available to remote and rural communities continue to create problems, and we are still seeing closures where the alternatives are not clear. That is a negative for communities that have grown used to having a local branch. In many cases, even small branches can be a keystone in maintaining town centres, and businesses react to closures. Most people are dismayed by the banks' retreat from the high street and the number of closures that have been announced. It is to those views from their own customers that the banks should be listening.

17:23

George Adam (Paisley) (SNP): Initially, I was going to articulate my arguments using the notes that I have in front of me but I have decided that I am sick of this nonsense—I am sick of getting a letter at the last minute from a major corporation or a bank telling me about the devastation that it is going to cause in my community. I am sick of getting an email telling me that it is only 0.8 miles to the nearest branch in Sauchiehall Street—most

members will work out that Sauchiehall Street is not in Paisley. It was such a cut-and-paste effort that the bank had not taken the time to tell me that there was a Paisley south branch in my own home town.

I am angry about this because we are now in a position in Paisley where we have only one Bank of Scotland branch and one Royal Bank of Scotland branch. At one point, the Bank of Scotland had a south branch and two central branches plus one in the west and one in the east. Now we just have that one Bank of Scotland branch.

How are many of the older people in my community going to cope? Let us talk about the community in the south end of Paisley. There are three or four blocks of high flats that are full of families that have been in there since the day the flats were built, so there are now many older people there, and many of them have mobility issues. One of the blocks in particular has been adapted for older people with mobility issues. They bank in their local branch and they know the faces of the staff there, because they have seen them numerous times. They do not know one end of a computer from the other, so the banks should not ask them to do online banking.

The banks should also not ask them to go to the local post office. Many members have had subpostmasters come to us and say that they are struggling to make a living with the services that they offer. Every time a bank branch closure happens, the bank says that the only way forward is for people to get services at their local post office, but the post office network is under pressure, too, like the bank branch network. The banks should not say that every time they decide to make a commercial decision to close a branch—and it is a commercial decision. We bailed out the banks, but we are the ones who are still suffering after all these years.

It is the older and disabled people in the community in my town who are going to suffer. Paisley, which is the biggest town in Europe, let alone in Scotland, is going to have all the major banks within 200m of one another. Where is the logic in that? Where is the support that we have often asked the banks for? We have supported them. I have said to many of my constituents, "If they don't support you and our community, don't support them. Change your bank, because it's a lot easier now than it was in the past."

I have changed my bank. When the bank that I banked with for years was pulling out of Paisley, it told me that it had a lovely branch smack in the centre of Glasgow. I said, "Well, sorry, that's it. We're having a parting of the ways." I went to a branch of a Scotland-based bank that had spent £400,000-odd on its headquarters in Paisley. I

decided that, if it was going to invest in my town and show that there is a future in it, I would back it.

For far too long, the banks have thought that they can dictate to us. People get emails at the last minute. The emails are an afterthought. The banks do not even try to engage with the community and talk to it. They leave it to the parliamentarians at the last minute. We end up dragging them in, having the meetings with them and saying, "This community can't have this." I went through that with the Bank of Scotland in the east end of Paisley, which has a similar demographic of older people. We bring the banks in, and at that point they say, "We'll listen to you and do what we can," but they are just doing a tick-box exercise. They have no interest.

These institutions are purely in it for themselves. They need to remember that we are their customers and that our communities are the ones that are suffering. With regard to my branch, I ask the bank at this late stage to look at the matter again, look at the people it serves and make a different decision.

17:28

Monica Lennon (Central Scotland) (Lab): I am grateful to Sandra White for bringing to the chamber this important debate on an issue that concerns us all. I think that we all share the anger that we have just felt from George Adam and the concern about the serious impact that bank branch closures are having and will have on the communities that we represent.

Several RBS branches in my Central Scotland parliamentary region have already faced closure, including those in Hamilton, Larkhall, Airdrie, Bellshill and Stepps. Now Stonehouse is facing the closure of its Bank of Scotland branch. That has happened—again—without full consultation with customers and it is another example of the banks treating loyal customers with contempt.

I am concerned about the cumulative impact of all the closures. Banks are literally profiting from the closures, and customers are paying the price, given the increased travel costs that are associated with having to go and visit branches in neighbouring towns or go into the cities. People are experiencing poorer customer service, with longer queues and waiting times as the remaining branches pick up the pieces.

Banks tell us that they are responding to changing customer behaviour, but what they are doing looks like a cost-cutting exercise, and communities are losing access to valued local banking services. I completely reject the idea that there is no demand for local banking services. High street bank branches are closing at the incredible rate of 60 a month, according to

Which?, but a YouGov poll found that 58 per cent of people and 68 per cent of small business customers said that a bank branch is important to them. Sandra White's constituent made the point very well.

Bank branch closures are not merely an inconvenience. I think that all members would agree that some of the most vulnerable people in society are hardest hit by branch closures. Sandra White talked about the impact on older people and people with disability and mobility issues, and Age Scotland has highlighted that a substantial proportion of older people in Scotland are not connected to the internet; the number increases with age.

A fifth of UK households are now more than 3km from their nearest branch, according to Which? Longer journeys are a concern for people with mobility issues, and the additional travel costs will affect the poorest, who simply do not have the spare cash to be able to get a bus to the bank—or indeed a taxi, if there is no bus service or the service is not reliable.

Members talked about the importance of local businesses being able to access banking. Such businesses are the backbone of our economy and will be damaged by the changes.

Bank branch closures lead to increasing reliance on ATMs, but free cashpoints are disappearing from our high streets and in their place are ATMs that charge their customers. In Stonehouse, which is losing its Bank of Scotland branch, two out of the five available ATMs charge customers. There is a risk of financial exclusion for vulnerable people.

This cannot continue. Communities need greater protection against banking and ATM deserts. No one should have to worry about having to travel more than 3km to access a bank or paying to access their own money. That is why Scottish Labour has called for mandatory consultations on bank branch closures. In Westminster, my Labour colleague Ged Killen, who is the member for Rutherglen and Hamilton West, has led the way by proposing a ban on ATM charges. Labour is serious about the issue.

I again thank Sandra White for giving us the opportunity to discuss the matter, albeit briefly. We cannot abandon communities by leaving them without the basic banking infrastructure that they need. Banks have a responsibility to consult meaningfully with customers.

There is also a real and pressing need for Government intervention at UK level. Labour in Westminster and here at Holyrood will continue to condemn and oppose bank branch and ATM closures. We welcome the opportunity to work

cross-party to stand up for our communities on the issue.

17:33

Stewart Stevenson (Banffshire and Buchan Coast) (SNP): This is one of those occasions when I feel grateful that I am more than a sword's length from any of my colleagues in the chamber, as I declare that I am a shareholder in the Bank of Scotland—of course, as a result of my 30 years of employment, which ceased nearly 20 years ago.

I start with a few facts about what is going on. The Scottish Parliament information centre tells us that a third of bank branches in Scotland closed in the past 10 years. Which? found that 78 per cent of consumers in the two lowest-income household groups rely on cash—indeed, 26 per cent of respondents in those groups said that they never use card payments—and that 80 per cent of over-65s rely on cash. Research by Reuters showed that 90 per cent of the bank branch closures in the past year occurred in areas where the median household income is below the national average.

Those statistics tell us that bank branch closures are adversely affecting the people who are least able to cope with them. Branch closure is a socially discriminatory activity, and we will all pay the price if it continues at the current rate.

ATMs are closing across the UK at a rate of 250 a month. I make a little observation about ATMs in Scotland: they should not be closing as fast. Because the Scottish banks issue their own bank notes, they can fill cash dispensers at no cost, beyond the cost of printing the money, whereas in England the banks have to pay a pound for every pound that they put in the cash dispenser. Scottish banks pay later, when the cash is paid out. It is much cheaper to run ATMs in Scotland, so we should not see the same rate of closure. Typically, there will be £40,000 in a cash dispenser.

Banking is a simple business, although the bankers make it look difficult. Banks take money in and then they reward the people who deposit the money; they lend money out and they charge people. A transaction system sits in the middle. To make banking work, they just need to get the two sides of the equation to work.

Why did bank branches develop in the way that they did? The answer is that, typically, people deposited money in the rural branches; in the city branches, the banks lent the money out. That was the traditional banking model—in particular, for the Trustee Savings Bank—in which the banks funded the lending from their depositors. That was a safe model for banking. One of the contributing factors to the bank crash in 2008 was that banks had increasingly gone to the wholesale markets to get money and that they had moved away from

keeping the two sides of banking in balance. That didnae help.

In my previous constituency—before the boundaries were changed in 2011—the Clydesdale Bank announced that it was going to shut the branch in New Deer. That community of some 600 people was outraged by the announcement. Those people got together and bought the bank branch. They then persuaded the Royal Bank of Scotland to move in and run the bank branch. It is still there today in the face of all the closures. That was largely down to a dear and now departed colleague, Councillor Norma Thomson; she was one of a range of people in the community who were involved. My point is that there is potential scope for community action and making banks responsive to the communities in which they operate.

A particular example of the risk that banks take in disconnecting themselves from communities comes from South Africa in the early 1990s. In the townships of Soweto, Khayelitsha and elsewhere, people who had informally built their houses wanted to regularise their position and engage in the formal banking system. The traditional banks would have nothing to do with those people, because of their situation. Subsequently, the people set up their own banks and deserted the traditional banks. That is what could happen to the traditional banks here—Bank of Scotland and the Royal Bank of Scotland. Today, the population of Soweto is 1.27 million people; therefore, it is not a trivial matter that those people deserted the traditional banks and took their banking fates into their own hands. The same sort of thing could happen in Scotland. Those so-called commercial decisions can ultimately be to the commercial disinterest of the organisations that are devastating so many communities—particularly those that are most affected by the closure of banks, because they are the communities that already have least in our society.

17:38

Bill Bowman (North East Scotland) (Con): I welcome the chance to speak in tonight's members' business debate and I thank Sandra White for securing it.

Bank of Scotland branch closures in the north-east region have—and will continue to have—consequences for many of my constituents; in particular, they affect both Dundee and Kirriemuir, with branches closing in both places.

For clarity, I am a customer of Bank of Scotland and also of the Lloyds Banking Group, which owns Bank of Scotland.

The rate of bank branch closures has been steadily increasing for the past few years. The

number of bank branches in Scotland fell by a third between 2010 and 2017, with five banks closing 488 branches between them. Bank of Scotland has shut 87 branches since 2010, going from 293 to 206, which is a 30 per cent decrease. Robin Bulloch, from Bank of Scotland, told members that the 30 per cent reduction in the number of branches was a “measured and gradual approach”, taking into account the changing habits of customers, with people shifting to online banking services.

However, the Economy, Jobs and Fair Work Committee found that closures had left communities and local businesses feeling “abandoned”. In March, the committee opened an inquiry into bank branch closures with the aim of gathering evidence on the effect on local businesses, customers and the economy. On closer questioning of the five banks—Bank of Scotland, RBS, Clydesdale Bank, TSB and Santander—it emerged that none of the banks had held a formal consultation process with local people before deciding to close a branch. Many members have referred to that.

The closure of Bank of Scotland’s flagship city branch on the Nethergate in Dundee is a blow to customers and staff alike. The branch will close at some point between February and June next year. That is yet more bad news for the city. Last year, more than 250 jobs were axed at the Bank of Scotland group’s call centre in the same West Marketgait building after it was closed. Following that closure, some staff were offered voluntary redundancies, while others were offered the chance to transfer to the bank’s Dunfermline call centre, which, of course, is more than 50 miles away. Current customers of the branch that is set for closure in 2019 will at least have their accounts re-aligned to Bank of Scotland’s Fairmuir branch on Clepington Road, which is 2 miles away.

Bank of Scotland bosses have blamed the latest decision on the changing ways in which customers choose to bank, claiming that 79 per cent of Dundee city’s personal customers predominantly use telephone or online banking, or alternative branches. A Bank of Scotland spokesperson said:

“We have made the difficult decision to close the Bank of Scotland Dundee City branch in February 2019 due to the changing ways customers choose to bank with us ... customers can continue to access their banking locally by visiting the nearby Post Office, which is less than half a mile from the branch.”

However, while many people are switching to online banking, there are concerns among many communities—particularly the vulnerable, elderly and disabled—about how the closures will affect them. According to Age Scotland, 37 per cent of people over the age of 60 in Scotland do not use the internet, which is equivalent to the size of Edinburgh’s population. My colleague Gordon

Lindhurst MSP has said that members of the Economy, Jobs and Fair Work Committee and the Scottish Parliament were

“in no doubt that the loss of branches has had a negative impact on communities and businesses across Scotland.”

Kirriemuir in the north-east region will have no physical Bank of Scotland branch after the bank announced that it is to close next year. The town has a population of around 6,500 to 7,000 who will be left without a bank. That not only deprives residents of a service but affects shopkeepers and business owners who are already under normal commercial pressures. The nearest bank for those living up Glen Isla will probably be Blairgowrie, while others will have to travel to Forfar for their closest Bank of Scotland branch.

A 2017 report by UK Finance found that 71 per cent of adults used online banking in 2017, amounting to 38 million people. Furthermore, debit and credit cards overtook cash and coins as the most commonly used method of payment in the UK last year. Many people feel as though they have been abandoned by the banks following the closures, and that the alternatives offered do not meet their needs. It is vital that people have access to cash and face-to-face banking services. As the Economy, Jobs and Fair Work Committee concluded, the banks must engage properly with people and businesses on their needs before deciding to close branches in the future.

As we can all see across our constituencies that have been affected by bank branch closures, it is not just the customers who suffer. Jobs, businesses and the high street are also impacted. Job losses and empty buildings on what were once busy shopping streets are proof that there have been and will continue to be many negative impacts of branch closures.

17:43

The Minister for Public Finance and Digital Economy (Kate Forbes): I, too, thank Sandra White for lodging the motion. It is sad that she had to do it, because it has been only two months since the Economy, Jobs and Fair Work Committee brought branch closures to the chamber. Here we are again, debating the same subject, which is very disappointing.

My views on the subject are on the record because—as Sandra White said—I lodged a motion on it for a members’ debate a year ago. It is a bit like a broken record: the same concerns and worries are being raised time and again with no sense that the issues are being responded to.

Sandra White gave a long list of areas in her constituency that no longer have a branch presence. I started scribbling down the names of those places, but there were so many that I did not

get very far. That tells the story of the number of communities whose residents are expected to travel to do their banking.

For some people, that might be part and parcel of their daily activities, but as members have mentioned, there are elderly and frail customers who, frankly, cannot travel the distance. People who run small businesses cannot take time off work daily to visit a branch during work hours. In my rural area, the distances are so considerable that such journeys are extremely challenging. It is not just a case of popping down to the nearest branch; it takes a considerable chunk of the day to get there.

The question, therefore, is whether the banks are serving communities, frail and elderly customers and small businesses. Judging by this evening's debate, I would say that the answer is a resounding no.

We try to quantify the issue by quoting figures from Which? or YouGov, but the impact on individuals who depend on being able to visit their local branch is enormous. Graeme Dey mentioned the evidence from Angus, and Clare Haughey talked about the situation in her constituency and the lack of privacy in some alternatives—for example, post offices. Jamie Halcro Johnston referred to the removal of the ATMs from Keith and Lossiemouth and the continuing dependence that we all have on cash.

In September's debate, I promised to write to Link and the Payment Systems Regulator to seek assurances that no ATM in a vulnerable community would close until a new operator had been found, and that communities would not be left without free access to cash. Access to cash and the ability to deposit cash remain critical, especially for small businesses and rural communities. It is clear that there will continue to be a long-term need for access to cash banking services in Scotland. I wrote to the chief executive of Link, and I am pleased to say that he responded. I intend to meet him to discuss Link's support for, and commitment to, Scotland.

Richard Lochhead talked about the closures in rural Scotland and mentioned that 40 per cent of the high street banks in his constituency had closed in the past eight years. He also referred to the importance of the last branch standing, as it were, in such communities, and the need for extra safeguards. I whole-heartedly support that call.

George Adam talked about the older people who are left to bear the brunt of banks' decisions to close branches. At the end of the day, banks rely on our custom. The issue of customers voting with their feet when it comes to supporting local banks is critical.

Monica Lennon made the important point that although we might look in isolation at the impact of branch closures on our communities or constituencies, such closures have had a cumulative impact over the past few years. Of small businesses, 68 per cent say that a local branch is still important. Stewart Stevenson talked about the adverse impact on the people who are most dependent on the branches.

Scotland has fared disproportionately badly, with a reported 367 branches having been closed. Recent figures from Which? show that the UK has lost almost two thirds of its bank-branch network in the past 30 years, which has left a fifth of households more than 3km from their nearest current-account provider.

As the minister who is responsible for the digital economy, I recognise that many customers are choosing to bank in different ways, but digital should never be a means of excluding customers, especially those who are most dependent on the physical presence of a bank.

Maurice Corry (West Scotland) (Con): The issue of alternative ways of banking in rural areas is one that I had to look into as part of my community safety role. The ability to use post offices for banking lies in the hands of the British Bankers Association, which has 28 members, one of which is the Allied Irish Bank, which provides the Post Office's banking.

It is quite clear that there is an opportunity to resolve the issue and to give the post offices in our rural areas maximum banking facilities. Has the minister ever discussed with the British Bankers Association whether the Post Office could be approved for full banking facilities? I understand that that is possible and lies in the hands of that association. The minister might have to address the question to Westminster, which I implore her to do, because that would solve a lot of problems. I have met people on the islands and in other rural areas who said that there is no problem in doing that.

The Deputy Presiding Officer: Take as long as you like to finish what you are saying, minister, because that was a long intervention.

Kate Forbes: I thank Maurice Corry for his fair question. As he quite rightly said, the UK Government retains legislative and regulatory responsibility for banking. We have raised the issue of closures directly with the UK Government in a number of ways in trying to mitigate the impact of closures, and we have called for access to essential banking services to be maintained. I will take Maurice Corry's specific point away with me.

Earlier this year, the Scottish Government convened a round-table discussion with the main

Scottish banks on branch closures and provision of banking services. We have now established a banking and economy group as a sub-group of the Financial Services Advisory Board. The sub-group is co-chaired by the Cabinet Secretary for Finance, Economy and Fair Work and Scottish Financial Enterprise. Through it, we will continue to engage with the banks on the various issues that have been raised in the debate.

Sandra White: Banking is changing due to the digital economy, as the banks tell us, but things are also changing with people's benefits now being paid into banks, which is a huge problem. Monica Lennon mentioned the distance that people have to walk to get to a bank, and that some people cannot afford the bus fare. Will the minister raise that issue with the sub-group?

Kate Forbes: I was going to close by assuring Sandra White that I would raise the specific concerns of her constituents directly with the Bank of Scotland. The point that she just made is valid. I can quote statistics that show the general impact of closures, but for people who are dependent on the presence of a physical branch to access cash and who depend on being able to pay in money there, to receive benefits such as universal credit or to do other things, their whole lives are being impacted on. I happily give the assurance that I will raise directly with the banks the concerns of Sandra White's constituents and the more general social impacts of branch closures, because that impact cannot go unnoticed.

Just today, I spoke to a number of individuals, including representatives from Age UK, about how we might increase digital participation among the older generation, and I was told that 37 per cent of individuals over the age of 60 do not use the internet. If they are not online, that means that they are entirely excluded from locally accessible free-to-use banking services, which is a massive problem.

While recognising that the regulatory and legislative frameworks are not the Scottish Government's, I commit to continuing to raise such issues directly with the banks and the UK Government to try to get banks to realise the social impact—not just the commercial impact—of their decisions. The banks are accountable to their customers, who will vote with their feet if their concerns and interests are not taken into account.

Meeting closed at 17:53.

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