

Scottish Women's Convention
response to the UK Government's Call
for Evidence on:

Drug Prevention Policies and Landscape Across the UK



February 2024

The Scottish Women's Convention (SWC)

The SWC is funded to engage with women across Scotland to ensure that their views are represented in policy and decision-making processes. The SWC uses the views of women to respond to a variety of parliamentary, governmental, and organisational consultation papers at Scottish, UK and international levels.

The SWC gathers information using different methods, including roadshows, thematic conferences, surveys, and both in-person and online roundtable events. This submission presents the views of a range of women, reflecting their opinions, ideas and lived experience. Working together with many other equalities organisations and community groups, we use our broad network to ensure that women from a range of backgrounds are heard and acknowledged. We are continually reviewing innovative ways of engaging with women and developing our trauma-informed and culturally sensitive practice to support vital contributions from as many women as possible.



Premise

Scotland is currently in a state of emergency as a result of drug-related deaths, with the country holding the unenviable status of the highest drug-related deaths in Europe¹. Of those dying, significant proportions reside within the most deprived communities, being 15 times more likely to experience a drug-related death than in the least deprived areas, with polydrug use significantly contributing to loss of life². Men still make up the majority of these deaths however, there has been a steady closing of the gap between men and women. Women's deaths have been consistently rising between the year 2000 and the present day, while men's have been steadily decreasing, with this being accounted to targeted prevention methods which have aimed to reduce men addicts' likelihood of death³. However, women's continued economic disadvantage must also be considered as a potential factor, with the myriad of crises they have recently faced such as the Covid-19 pandemic, continued UK Government austerity measures and the rising costs of living, actively contributing to their poor mental health and likelihood of experiencing poverty.

As a result of this worrying trend, the SWC hosted a hybrid conference entitled 'The Impact of Drugs on Women and Families in Scotland', where attendees heard from expert speakers and took part in roundtables (focus groups). An online survey was also released to evaluate the adequacy of prevention policy, with 35.7% of respondents having had personal experience of substance-based addiction at some point in their life, and 100% knowing a family member/friend who had been/is addicted to harmful substances. The below report contains statements collated during this piece of work, highlighting the multiple recommendations made by women, such as a move to multi-agency, person-focused approaches and commitments to long-term investment in community projects⁴.

¹ ITV News. (2023). Scotland Drug Deaths Rate Decreases but Remains Higher than the Rest of Europe. Available at: <https://www.itv.com/news/2023-08-22/scotland-drug-deaths-drop-but-remains-highest-in-europe>

² Scottish Government. (2021). National Mission on Drug Deaths: Plan 2022-2026. Available at: <https://www.gov.scot/binaries/content/documents/govscot/publications/strategy-plan/2022/08/national-drugs-mission-plan-2022-2026/documents/national-mission-drug-deaths-plan-2022-2026/national-mission-drug-deaths-plan-2022-2026/govscot%3Adocument/national-mission-drug-deaths-plan-2022-2026.pdf>

³ National Records of Scotland. (2022). Drug-Related Deaths in Scotland in 2021. Available at: <https://www.nrscotland.gov.uk/files/statistics/drug-related-deaths/21/drug-related-deaths-21-report.pdf>

⁴ The Scottish Women's Convention. (2023). The Impact of Drugs on Women and Families in Scotland. Available at: <https://www.scottishwomensconvention.org/resources/drugs-conference-report-23.pdf>

Our Response

What noteworthy drug prevention measures and activities are being implemented currently in your respective home nation, either at the local, regional or devolved administration level?

The use of Safe Drug Consumption Facilities (SDCFs) in the City of Glasgow was recently approved with hopes of reducing both the number of drug-related deaths and drug paraphernalia scattered across the city. Whether this will have a significant impact on the drug use landscape in Glasgow is yet to be seen, with the new centre set to be open sometime in 2024⁵. Women consulted by the SWC on this issue were generally positive around the creation of such facilities, with 64.3% of survey respondents stating that they supported their implementation. They gave multiple reasons for this support, citing safer drug usage and drug paraphernalia levels. Some women did however state that they did not support the move (14.3%) proposing that they felt it could encourage drug use. It is therefore vital that this new facility in the City of Glasgow is closely monitored and evaluated, to understand whether consequently SDCFs have a positive impact on drug use in Scotland.

- “...regardless of what people feel about people who use substances, they still have a right to be safe and they still have families/friends who don't want to lose them...Drug consumption rooms have been proven to reduce risk to health and reduce crime in other countries.”
- “It [SDCFs] would be good for health and create less harmful litter”
- “I think this [SDCFs] encourages drug use.”

In addition, the usage of specialist facilities to assist drug-addicted mothers, such as Aberlour's 'Mother and Child Recovery House', has been highly effective in increasing the health and wellbeing of this highly stigmatised group⁶. The recovery house serves up to four women at a time on a national level. Attendees of the SWC's September 2023 conference heard from a worker at the service and how they have made a positive impact on the lives of mothers, reducing drug use as well as the number of children entering the care system. This service runs 24/7, with staff being available around the clock, and needs being met at an individual level. Aberlour created this service after mothers highlighted that they were unable to access some drug recovery meetings/services due to childcare responsibilities. Increasing the number of similar services across the UK, could enable a sympathetic, person-centred approach to drug reduction through a gendered lens.

- “But actually, one of the difficulties that she [drug-addicted mother] speaks about is not being able to bring her baby to recovery cafes or into the recovery

⁵ Glasgow Health and Social Care Partnership. (2023). Safer Drug Consumption Facility. Available at: <https://glasgowcity.hscp.scot/sdcf>

⁶ Aberlour. (2024). Mother and Child Recovery House. Available at: <https://www.aberlour.org.uk/service/mother-and-child-recovery-houses>

community where it isn't suitable for babies. She has no childcare; she has nobody other than the third sector to support her...she's impinged already trying to recover because the services just aren't meeting the needs of mothers"

How would you describe the drug prevention landscape in your respective country? Descriptions could include the level of funding, degree of cross-departmental integration and specialism dedicated to prevention?

The Scottish Government has elected a public health approach rather than continued criminalisation, highlighting the negatives associated with this response. They have stated that criminalisation results in high policing costs, while simultaneously worsening healthcare outcomes for those addicted to drugs. They have instead proposed an approach which focuses on effective treatment options to enable those who use drugs to manage their lives. The Scottish Government outlined key priorities in the 'National Mission on Drug Deaths, 2022-2026', committing £250 million to meet these aims. The Scottish Government have also attempted to increase understandings of the drug landscape in Scotland through the National Mission Oversight Group and lived experience panels. The key priorities include:

- A focus on lived experience
- An equalities and human rights-based approach
- Creating a resilient and skilled workforce
- Tackling stigma
- Improving surveillance and data collection methods
- Remaining psychologically informed throughout

Women we have spoken with strongly support the Scottish Government approach, believing that increased criminalisation worsens outcomes for users and families. They proposed that criminalisation increases levels of stigma, creating a further barrier when attempting to access treatment options. As has been highlighted by women with first-hand experience of addiction and of those providing support for addicts, there is a sense of hopelessness caused by the continued discrimination and persecution experienced by these groups. This was particularly impactful for women drug users with children, with the fear of losing their child preventing them from accessing social and/or health services. The fear discussed was found to be valid, with support workers explaining that they had witnessed drug-addicted mothers losing care of their children after accessing recovery services or after interacting with the criminal justice system. It was proposed that removing the risk of custodial sentences/fines for drug addicts would encourage an empathetic approach, while concurrently reducing drug-related deaths.

- “...we speak about the stigma associated with mothers and substance use. Mothers are fearful that they may lose their baby if they ask for help, because very often that's what happens.”
- “90% of the women I work with or have worked with over the past two years have lost care of their children, more than one, some of the women have lost more than three of their babies into the care system.”

Furthermore, a continued commitment to improve data collection, while also incorporating the views of those with direct experience of drug use, aligns heavily with the opinions of women the SWC have consulted with. They have stated that treatment plans must be co-produced with users to have the most effective results, with current offerings lacking this person-centred element. It has been highlighted that current rulings surrounding healthcare actively worsen addicts' health. For example, sobriety is a key condition that must be met in order to access mental health support, despite mental health being a key contributor to addiction. Women would therefore like to see a less siloed approach, which considers each individual separately, creating a unique treatment plan to target a range of problems, rather than focusing solely on addiction.

- “Mental health services won't provide intervention until the addiction is controlled.”
- “No one agency can address drug deaths...it's more about the contribution treatment makes, alongside housing, policing, justice, prison culture”
- “...at the heart of it, these negative emotions that they want to escape won't leave them, but they just want to fill that void. And I think that's where the mental health support comes in, and it's not looking at things in isolation.”

What are the significant barriers currently faced for the implementation of effective prevention interventions?

A significant barrier to the implementation of effective prevention interventions is the directly opposed priority of both the UK and Scottish Governments. UK Government approaches have focused on increased policing and tougher legislation around drug use and possession, in comparison to a public health approach, as has been taken by the Scottish Government. Despite inclusion of improvements to treatment in the UK Government's 10 year plan, the clear onus is on the reduction of crime, and actively pursuing harsher sentences for those convicted of drug-related harms⁷. The polarised debate surrounding effective drug use prevention has limited the Scottish Government from successfully tackling the unique drug-related death emergency seen in Scotland, and therefore more must be done to work collaboratively to prevent further loss of life.

Further to varying ideologies, increases to the cost of living and continued austerity measures have impacted women in Scotland. There are clear connections between

⁷ UK Government. (2021). From Harm to Hope: A 10-Year Drugs Plan to Cut Crime and Save Lives. Available at: https://assets.publishing.service.gov.uk/media/629078bad3bf7f036fc492d1/From_harm_to_hope_PDF.pdf

increased levels of deprivation and drug use, with drug-related deaths more likely in the most deprived areas, as well as hospitalisations: approximately half of patients with drug-related hospital stays reside in the most deprived areas of Scotland⁸. Due to the continued economic disadvantage experienced by women through increased caring responsibilities and limited employment opportunities, women are the most likely group to experience poverty. During our work, women have explained that this contributes to a never-ending cycle of addiction and harm, which requires a multi-agency approach to facilitate change. The issue of poverty is particularly pertinent for those living in rural locations, with increased centralisation removing employment opportunities for young women. Addiction workers in rural Scotland have explained that they believe poverty to be the key driver in addiction and improved opportunities must instead be given to reduce drug use. Therefore, it can be said that the negative impacts of drug use, will have a disproportionate effect on women and their lives across rural and urban areas, further worsening poverty and their mental health.

- “...there’s no one solution, but I would like to see better employment opportunities and give them careers that they’re passionate about so they can go into a decent job. I think that would stop the drug use”

What are the most effective prevention interventions and service models in your home nation and how would you evaluate the impacts?

As the SWC does not have specific expertise in the area of drug reduction, the organisation would be unable to state which prevention interventions and service models have been the ‘most’ effective in Scotland. However, women themselves have highlighted the good work being carried out by third sector organisations to reduce drug addiction through care. Women have stated that they felt supported by third sector organisations, with the inherent flexibility of the sector enabling a person-centred approach. They have also explained however, that poor funding for these services is contributing to further harm for service-users, creating instability and a post-code lottery for support. We therefore recommend increased funding for third sector organisations who offer life-saving support for drug addicts and their families.

- “It seems charities and local support groups are left to try and support those in addiction and their families. More funding and professional input to assist and support these organisations and groups may help, as well as more mental health services in communities.”
- “[The Scottish Government should] fund organisations working with this client group.”

Furthermore, as an organisation which greatly values the use of lived experience, the utilisation of service-users throughout the evaluation process is key in ensuring effective impact assessment. The usage of a participative method has multiple advantages,

⁸ Public Health Scotland. (2021). Drug-Related Hospital Statistics: Scotland 2020 to 2021. Available at: <https://publichealthscotland.scot/publications/drug-related-hospital-statistics/drug-related-hospital-statistics-scotland-2020-to-2021/summary/>

including creating increased transparency, while remaining context specific⁹. Therefore, considering how addicts and their families can play a role in the design and evaluation process, may assist in effective assessment.

⁹ MacDonald, C. D. (2012). Understanding Participatory Action Research: A Qualitative Research Methodology Option. *The Canadian Journal of Action Research*, 13(2), pp. 34-50.

Conclusion

Having listened to women, our three key recommendations on this topic are:

- Substance use must be viewed as a multi-faceted issue, considering how early adversity, poverty and the associated hardships can drive individuals towards drug use.
- Increased engagement with drug users and their loved ones, to ensure future policy developments are person-centred and community orientated.
- Committed long-term funding for third sector organisations who provide prevention and management services.

The SWC is grateful for the opportunity to respond to the UK Government's Call for Evidence on **Drug Prevention Policies and Landscape Across the UK**. As an organisation, we will continue to work with women from across Scotland to gather voices and experiences relating to this topic and its effects on women's equality.

For further information or to share your views, please contact:

Email - info@scottishwomensconvention.org

Telephone - 0141 339 4797

Website – www.scottishwomensconvention.org

Facebook, X & Instagram - @SWCwomen



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