

Drug Death Prevention (Scotland) Bill

About You

Q1. Are you responding as:

On behalf of an organisation

Q2. Which of the following best describes you? (If you are a professional or academic, but not in a subject relevant to the consultation, please choose "Member of the public".)

No Response

Q3. Please select the category which best describes your organisation:

Third sector (charitable, campaigning, social enterprise, voluntary, non-profit)

Optional: You may wish to explain briefly what the organisation does, its experience and expertise in the subject-matter of the consultation, and how the view expressed in the response was arrived at (e.g. whether it is the view of particular office-holders or has been approved by the membership as a whole).

Waverley Care is Scotland's HIV, Hepatitis C and sexual health charity.

Q4. Please choose one of the following:

I am content for this response to be published and attributed to me or my organisation

Please provide your name or the name of your organisation. (Note: The name will not be published if you have asked for the response to be anonymous or "not for publication".)

Waverley Care

Q5. Please provide a way in which we can contact you if there are queries regarding your response. Email is preferred but you can also provide a postal address or phone number. (Note: We will not publish these contact details.)

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Q6. Data protection declaration

In order to proceed, please confirm that you have read and understood the Privacy Notice contained on Page 1

I confirm that I have read and understood the Privacy Notice to this consultation which explains how my personal data will be used.

Q7. If you are under 12 and making a submission, we will need to contact you to ask your parent or guardian to confirm to us that they are happy for you to send us your views.

No Response

Your Views On The Proposal

Q8. Which of the following best expresses your view of the proposed Bill? (please note this is a compulsory question)

Fully supportive

Please explain the reasons for your response.

Waverley Care fully supports a Bill to enable the establishment of overdose prevention centres, including establishing a licensing framework for centres, in order to prevent death due to drug overdose; and to create a new body for the oversight of drug policy development and implementation in order to improve health by preventing and reducing drug use, harm and related death.

OPCs will contribute to a reduction in drug related deaths, premature deaths as a result of long-term drug use - which are not reported in National Drug Death figures - and to a reduction of HIV and Hepatitis C transmission. The Scottish Government have committed to reaching zero new HIV transmissions by 2030, and the elimination of Hepatitis C by 2024. This legislation would play an important role in getting Scotland closer to this target.

Q9. Do you think legislation is required, or are there are other ways in which the Bill's aims could be achieved more effectively? Please explain the reasons for your response.

Waverley Care agree that legislation is required to meet the aims of this Bill. While it is useful to expand measures such as Injecting Equipment Provision (one hit kits) and access to naloxone, a licensing framework to regulate and govern OPCs is required. It is necessary for OPCs to be continually reviewed and evaluated and the most effective way of doing so is through legislation. Legislation will also ensure consistency of service delivery for Health and Social Care Partnerships across Scotland.

Q10. Which of the following best expresses your view of the proposal to establish overdose prevention centres?

Fully supportive

Please explain the reasons for your response.

Overdose prevention centres are a lifesaving and necessary service in reducing Scotland's tragic number of drug deaths. There is ample evidence to show that OPCs play an important role in reducing HIV and Hepatitis C transmission by reducing needle sharing/other drug paraphernalia and providing a clean and safe space to inject and dispose of injecting equipment. Global examples show their effectiveness in reducing sharing of injecting equipment and blood-borne viruses. For example, predictive modelling research has predicted that Insite in Vancouver, Canada will prevent between 1191-1517 HIV infections over a 10-year period.

To be effective, OPCs must be sited in areas where street injecting already exists. We know that Scotland has a significant drug use problem, particularly in cities such as Glasgow where there were approximately 279 drug deaths in 2020. Street injection is common and concentrated in certain areas of the city such as Trongate, where Waverley Care's Street Support Team frequently visit and provide support for people who inject drugs (who are living with, or at heightened risk of HIV as a result of the HIV outbreak in Glasgow). This would enable the Street Team to link with service users and partners in developing a holistic, person centred, and multi-faceted approach, which evidence shows increases referral to drug treatment services and hence linking people into appropriate care

Q11. Which of the following best expresses your view of the proposal for a licensing regime to enable the establishment of overdose prevention centres?

Fully supportive

Please provide reasons for your response, including on the proposed conditions for licensing (see pages 12 to 14 of the consultation document) and on the proposal that health and social care partnerships are responsible for licensing and scrutinising OPCs?

Waverley Care support a licensing framework and the creation of statutory guidance. Having a list of requirements to allow Health and Social Care Partnerships to establish OPCs is necessary to ensure service delivery is of the highest standard, needs led, supportive, transparent and efficient.

Q12. Which of the following best expresses your view of the proposal for a new body, the Scottish Drugs Deaths Council?

Fully supportive

Please provide reasons for your response, including views on the proposed functions of the SDDC (see pages 14 to 16 of the consultation document) and on how it should operate in practice.

Waverley Care support the introduction of a Scottish Drug Deaths Council. However we believe it is imperative that people with living and lived experience of drug use and of HIV actively participate at every level, from policy to practice. In addition, we believe that the Council should develop a robust and accountable action plan with timescales, in direct response to the significant past and ongoing research that highlights the complex issues and drivers that lead to, and compound, addiction. This should have significant focus on what will be done, rather than what should be done.

Financial Implications

Q13. Any new law can have a financial impact which would affect individuals, businesses, the public sector, or others. What financial impact do you think this proposal could have if it became law?

a significant reduction in costs

Please explain the reasons for your answer, including who you would expect to feel the financial impact of the proposal, and if there are any ways you think the proposal could be delivered more cost-effectively.

Although OPCs can require significant funds to be set up and carried out, numerous cost benefit analyses show they are good value for money compared to other measures. Given the high life-time cost of treating diseases like HIV (about £360,000 per person) and Hepatitis B and C, avoiding even a small number of infections from sharing injecting equipment can mean OPCs become cost-effective. One cost-benefit analysis of Insite in Vancouver estimated that the facility provides a societal benefit of more than \$6 million per year.

Equalities

Q14. Any new law can have an impact on different individuals in society, for example as a result of their age, disability, gender re-assignment, marriage and civil partnership status, pregnancy and maternity, race, religion or belief, sex or sexual orientation.

What impact could this proposal have on particular people if it became law? If you do not have a view skip to next question.

Please explain the reasons for your answer and if there are any ways you think the proposal could avoid negative impacts on particular people.

This law would have a beneficial effect on equalities, particularly for vulnerable groups such as disabled people and those living in deprived areas. The gap between the most and least deprived areas in Scotland for drug-related hospital admissions has increased, and between 2019/20 and 2020/21 the rate of hospital admissions for those living in the most deprived areas decreased by 10%, whilst the rate stayed the same for those living in the least deprived areas.

Waverley Care's HIV Street Support Team work with some of the most marginalised, impoverished people within our society. Research shows that poverty and trauma are significant drivers for addiction and, in turn, people are also at heightened risk of contracting a blood borne virus. This is further complicated with homelessness, regular involvement with justice services, reliance on a punitive welfare system, underlying health issues, societal and self-stigma, and lack of social connection.

OPCs would create a supportive, holistic environment where people will become more visible and have access to a wide range of services based on needs identified, including mental health support and wound care. Evidence shows that people accessing OPCs engage better with services as looking at addiction through a health, rather than a justice, lens and working within the bio, psycho, social model.

Sustainability

Q15. Any new law can impact on work to protect and enhance the environment, achieve a sustainable economy, and create a strong, healthy, and just society for future generations.

Do you think the proposal could impact in any of these areas? If you do not have a view then skip to next question.

Please explain the reasons for your answer, including what you think the impact of the proposal could be, and if there are any ways you think the proposal could avoid negative impacts?

People who inject drugs are members of society but have been failed at many stages of their lives. The people Waverley Care's Street Team work with express a desire for a 'normal' life: to have a home, a job, a bed to sleep in, to close the door and be safe, and to stop the horror of their past and present from controlling their future. Investing in people through OPCs and ensuring a wide range of services are part of this model will work towards people feeling heard, visible, and valued. In order for this to be achieved, significant resources need to be allocated and a political will for this must be realised.

Long term investment and support for people who use drugs, through OPCs and other mechanisms, as well as addressing the drivers of poverty and trauma, will contribute towards creating a stronger, healthier and just society for the most marginalised in Scotland.