Drug Death Prevention (Scotland) Bill

About You

Q1. Are you responding as:

An individual

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".)

Member of the public

Optional: You may wish to explain briefly what expertise or experience you have that is relevant to the subject-matter of the consultation:

I have ~4 years of experience in working in harm reduction in both a paid and voluntary capacity.

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

No Response

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 (Note: The name will not be published if you have asked for the response to be anonymous or "not for publication".)

Cameron Scally

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.)

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

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.

The OPC operated by Peter Krykant from 2020 to 2021 showed that such interventions are easily achievable (he operated one largely alone, the resources of the Scottish Government could achieve much more) and incredibly effective both in preventing death and in providing an on-ramp for service users who are not currently engaging with other health services.

Further, it demonstrated that every death is a choice, made daily, by the Scottish Government not to intervene. Thousands of overdoses have occurred in sites like his around the world, and at time of writing *nobody* has died. The Scottish Government has the power to enact this bill and establish these sites, the only barrier is political cowardice.

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.

If Police Scotland were to issue a letter of comfort which guarantees they would not arrest or prosecute anyone providing or using such services, there are charities and informal groups across the country who would open their doors to provide them.

This is not a replacement for legislation, which is urgently required to begin operating "legitimate" services under the auspices of the NHS, for example, but a stopgap which would minimise the harm done during the glacial process of drafting and approving legislation.

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.

People are dying of overdose every few hours and I want that to stop.

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

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

Do not wish to express a view

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.

The Drug Deaths Task Force has proven that creating more bodies, more oversight is something that

you do in lieu of meaningful action, not in support of it. No more talking shops.

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?

some 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.

OPCs are incredibly cheap to run and would obviate the necessity for expensive post-hoc care for non-fatal overdoses, or the even greater expense involved in a fatal overdose. By providing clean injecting materials, they can also prevent the spread of BBVs like HIV and the lifelong care that is required to manage it.

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 specifically benefit people in lower socioeconomic classes, and could also provide specific benefits to people in marginalised groups where such drug use is even more stigmatised than wider society, who may otherwise be more inclined to using alone.

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?

Environment

- OPCs would reduce the amount of street injecting and the waste (including hazardous sharps) that comes with it.

Economy

- By reducing the number of people dying of overdose and providing on-ramps into longer-term care, OPCs could bring people who have fallen through the cracks of the economy back into it

Strong/healthy/just society

- OPCs would reduce the number of (disproportionately deprived) people who die or are disabled as a result of overdose
- Providing harm reduction materials like clean needles on-site would also reduce BBV transmission there's a reason Glasgow is experiencing an HIV outbreak.