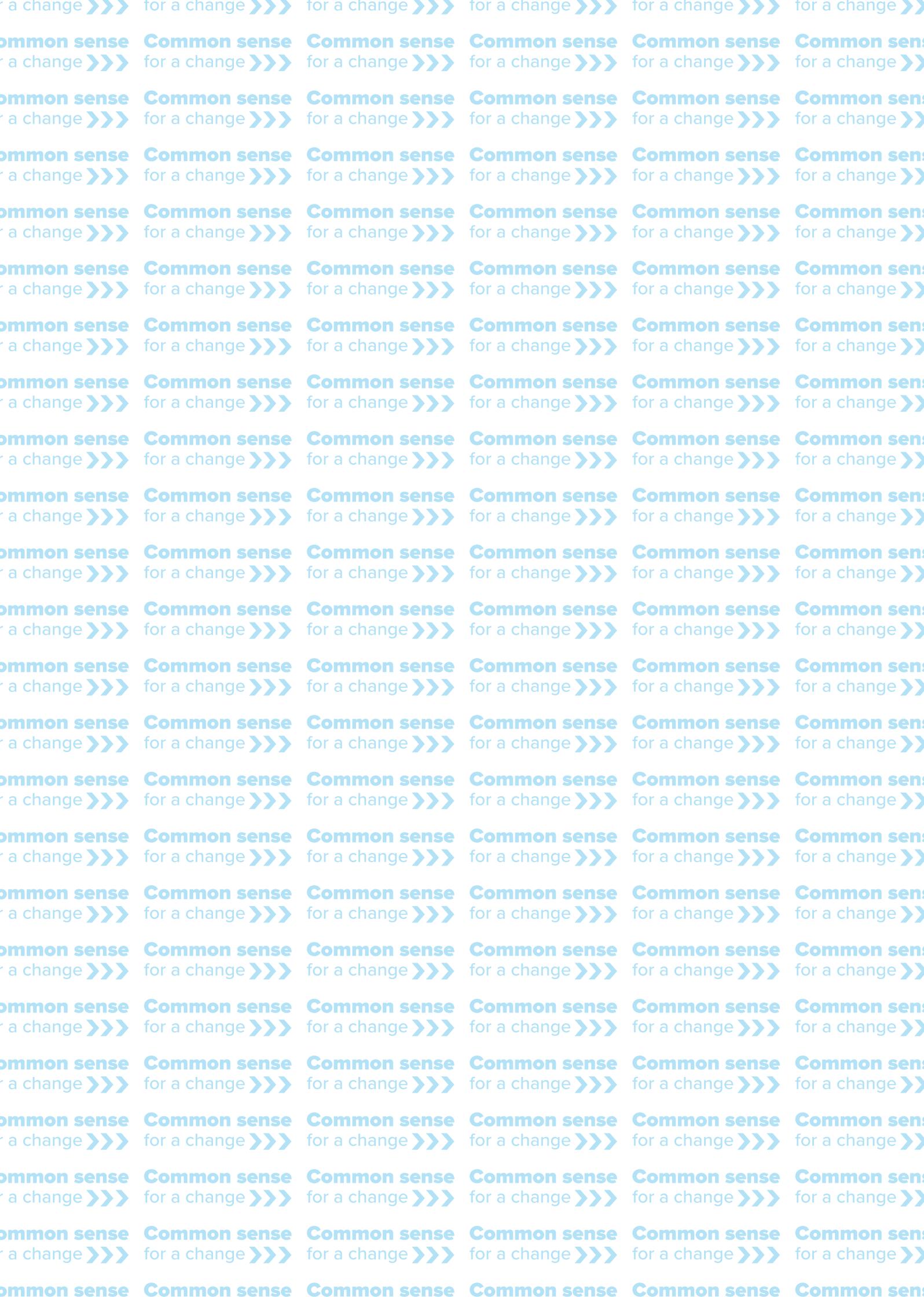


A COMMON SENSE PLAN

The Right to Recovery

Scottish Conservative & Unionist Party
March 2026





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Introduction

Scotland has had the highest drug deaths rate in Europe for seven years in a rowⁱ, a mark of shame for our country. Drug deaths have more than doubled since the SNP came to power in 2007, and drug deaths in Scotland are almost three times higher than in Englandⁱⁱ, with Nicola Sturgeon admitting the SNP had taken their “eye off the ball”ⁱⁱⁱ.

Alcohol deaths have fared no better with a 16% increase since 2019 and alcohol deaths in Scotland now above 1,000 for the twelfth year in a row^{iv}.

However, the SNP have run out of ideas. When it comes to drug deaths, they have focused all

their efforts on the opening of the Thistle drug consumption room in Glasgow, despite drug deaths increasing in the six months since it first opened^v. We believe that state-sponsored drug taking is not an appropriate response to this national crisis.

We would take a different approach, focus on targeting support to ensure that Scots can access rehabilitation and recovery for addiction, leverage the experience and knowledge that community pharmacies have to help with this, and deliver a true right to recovery.

Our plan to tackle the scourge of drugs and alcohol deaths

01

THE RIGHT TO RECOVERY

Implementing our Right to Recovery Bill. Enshrine in law a right to treatment for addiction for anyone in Scotland who is addicted to either alcohol, or drugs or both, after the SNP shamefully voted it down.

Introducing a new mandatory reassessment after two years on methadone. Where methadone is not working for an individual in helping them get off drugs after two years, they should be comprehensively reassessed to determine whether other substances should be prescribed instead, enter residential rehabilitation for enhanced treatment, or be referred to other support services. The aim is to put them on a pathway to recovery, while the mandatory reassessment process would involve input from experts and those who know them best.

Leveraging the experience of community pharmacists. We would ensure community pharmacists can provide input on our mandatory reassessments, and are supported to provide early intervention and referrals to drug users.

02

REDIRECTING FUNDING TO REHABILITATING AND RECOVERY

Defunding the Scottish Drugs Forum and spending the millions saved on rehabilitation. The Scottish Government has given the Scottish Drugs Forum over £4 million while drug deaths remain the worst in Europe. We would spend this money on recovery and rehabilitation rather than funding their lobbying campaigns against common-sense reforms like the Right to Recovery Bill.

Closing the Thistle and stopping the opening of more drug consumption rooms. Drug deaths continue to be at record highs, showing drug consumption rooms like the Thistle are not working while local residents suffer from increased anti-social behaviour and crime. We would close it, redirect the funding, and stop more from being opened.

Investing the money saved from closing the Thistle in rehabilitation, beds, and support services. Re-invest the £6.9 million saved by closing the Thistle in recovery, rehabilitation and support services, including increasing the number of residential rehabilitation beds to bring us in line with European levels which the SNP have failed to do.

03

TACKLING ALCOHOL HARMS

Scrapping Minimum Unit Pricing and targeting our efforts on improving alcohol addiction services. Unlike the SNP, we do not believe that taxing hard-working Scots more is the right approach and would scrap Minimum Unit Pricing. Alcohol related deaths have increased since it was first introduced while at the same time increasing costs for Scots. We would target our efforts instead on improving alcohol addiction services, and ensuring tougher enforcement against selling alcohol to minors.

Introducing alcohol tags and a pilot of drug monitoring patches. Alcohol tags have been used in England and Wales for years to successfully help offenders stay sober so we would roll them out here, and pilot the use of drug monitoring patches too.

04

A NEW APPROACH TO DRUG POLICY

Lobbying for a pilot two strikes approach to drug possession. While the control of drugs is a reserved policy, we would lobby to introduce a pilot “two strikes policy” where those caught with drugs intended for personal use for the first time in a designated area will benefit from being offered rehabilitation, treatment and support services. If they are caught again or refuse treatment the first time they will face criminal consequences.





Rehabilitation and treatment

Drug deaths are a mark of shame for Scotland but the SNP have given up – choosing to wave the white flag and support drug decriminalisation rather than taking action^{vi}. Their model of state-sponsored drug taking has failed miserably. This is not just the position of the Scottish Conservatives, even former SNP Health Secretary Alex Neil said, “We have to accept current drug strategies are not working^{vii}”. Alcohol and Drugs Partnerships, which tackle drug and alcohol misuse at the local level, also say they have no confidence in the SNP’s leadership. Only one in three ADPs agree that there is effective national leadership of the National Mission to reduce drug deaths by the Scottish Government^{viii}.

There was another option that the SNP could have taken. The Right to Recovery Bill was four years in the making and would have enshrined in law a right to treatment for drug and alcohol addiction for anyone in Scotland^{ix}. It was written with the help of experts like Faces and Voices of Recovery UK^x, 80% of respondents supported the Bill^{xi} and it was backed by many different organisations and individuals from across Scotland - including former SNP Health Secretary Alex Neil and former SNP Drugs Minister Fergus Ewing^{xii}.

Rehabilitation works, with a report from the UK Department for Health finding that every £1 spent on treatment will save £4 from reduced demands on health, prison, law enforcement and emergency services^{xiii}. However, the SNP and Greens voted the Bill down at Stage 1 in the Scottish Parliament, denying the chance to amend it and work with us to improve it^{xiv}. This shameful dereliction of duty was a betrayal of victims, and so one of the first pieces of legislation a Scottish Conservative Government

would introduce is a new Right to Recovery Bill to enshrine this right to treatment into law where it belongs, working with organisations and stakeholders from across Scotland to do so.

To improve access to rehabilitation, we would finally deliver the commitment the SNP made years ago^{xv} and increase the number of rehabilitation beds in line with the European average. On average, across 20 EU member states, residential treatment represents 11% of all treatment episodes compared to as little as 5% in Scotland^{xvi}. The Scottish Government set a target of increasing the number of rehabilitation beds by 50% from 425 to 650 from 2021 to 2026^{xvii} but the latest data shows it has still not been met^{xviii}.

We would also listen to those who have expressed concern that keeping people on methadone, sometimes for years, is not the most effective way to get people off drugs. Methadone prescriptions have cost NHS Scotland at least £20 million since 2019^{xix} despite it being responsible for more drug-related deaths than heroin every year^{xx}, with some people stuck on these prescriptions for years^{xxi}. Our new mandatory reassessment policy would mean if methadone were not working for an individual in helping them get off drugs, they should then either be moved on to prescriptions other than methadone, such as long-acting injectable buprenorphine, or be referred to other services such as entering a drug-free residential home for enhanced treatment^{xxii}.

A drug user who had been on methadone for seven years backed this policy saying, “I never really had any thoughts on whether I should be on it, or what sort of period of time I should be



on it for. And so, one year became two years, two years became three and so on. I like the idea of people having targets - if it's not working for you, we look for something else rather than just being left on it forever more^{xxiii}”.

While reassessments are technically meant to happen regularly, this is clearly a light-touch exercise and we are proposing a much stricter policy. Our mandatory reassessments would be a comprehensive examination of whether methadone is working for the person and would look specifically at whether there is a likelihood of them coming off methadone soon, and the benefits of being referred to other substances or services, while receiving input from experts.

We would deliver this policy by issuing a Ministerial Direction to all NHS Health Boards requiring mandatory reassessment after a maximum of two years, and at most two years after that if it is judged they should continue being prescribed methadone. We would write it into the Medication Assisted Treatment Standards with clear guidelines for implementation, and leverage the experience and knowledge of experts such as community pharmacists by giving them a say, where possible, on whether a person they have direct experience with should continue to be prescribed methadone.

To improve prevention, we would also ensure community pharmacists are given the support they need to better engage in early intervention and provide proactive referrals to support services for drug users who frequent their locations.

In addition, we would ensure that data is consistently collected and published by all health boards about the number of people being prescribed methadone, the cost of this, and the length that they have been on methadone for - as currently health boards such as NHS Greater Glasgow and Clyde are unable to provide this information in full despite it being crucial in addressing and understanding the issue^{xxiv}.

Finally, we would stop funding the Scottish Drugs Forum in order to redirect this money into rehabilitation and treatment where it will make

a difference. The Scottish Government gave them £4.3 million between 2018-19 and 2023-24^{xxv} but drug deaths have been the highest in Europe throughout. The Scottish Drugs Forum also lobbied against the Right to Recovery Bill.^{xxvi} We believe drugs policy should be focused on reducing harm, improving rehabilitation and stopping drug-deaths. Rather than giving out millions more in taxpayer money to continue an approach that has not worked, we would instead invest this money where it can have the most impact. For example, in residential treatment service placements like those provided by the charity Phoenix Futures at sites such as Rae House in Aberdeenshire.^{xxvii}

A common sense approach to tackling alcohol harms

Like so many things, the SNP's only idea on how to tackle alcohol related deaths involves taxing hard-working Scots even more. Minimum Unit Pricing came into force in 2018, and there were 1,136 alcohol related deaths in Scotland that year^{xxxviii}. However, alcohol related deaths have since increased and reached 1,185 in 2024, when they remained above 1,000 for the twelfth year in a row. Scots are now paying more for drinks such as wine, vodka and whisky than people in England thanks to this failed policy while the proceeds go directly to retailers rather than improving alcohol addiction services^{xxxix}.

The latest plan floated by the Drugs and Alcohol Policy Minister is to double down and increase alcohol prices automatically in line with inflation every year^{xxx}. Inflation has been increasing under this UK Labour Government so this would mean a hefty increase for everyone^{xxxi}. We will never pursue this policy, will oppose it in Parliament, and would scrap Minimum Unit Pricing which has failed to meaningfully reduce alcohol deaths.

We would instead focus our efforts on policies that work and are effectively targeted. By reintroducing our Right to Recovery Bill, we will enshrine in law a right to treatment for addiction for anyone in Scotland who is addicted to alcohol and increase investment in recovery, rehabilitation and treatment services for alcohol addiction. We will also work to ensure there is tougher enforcement against selling alcohol to minors.

Alongside scrapping Minimum Unit Pricing, we will roll out the use of alcohol monitoring tags in Scotland which Ministers have had the power to do since 2019^{xxxii}. This would see offenders released from prison fitted with these tags if their crime was driven by alcohol or a probation officer thinks they are likely to re-offend while drinking. There would be a stipulation that the tag must be worn for a minimum of 30 days and up to a maximum of one year^{xxxiii}. Courts would be able to order those on bail to wear a tag if they are concerned they may commit alcohol related offences. This would require them to abstain from alcohol while wearing the tag, with consequences for breaking it ranging from a fine to a prison sentence.

Where these tags have been used in England and Wales, in one year more than 97% of offenders who were made to wear an alcohol tag as part of a community sentence stayed sober throughout^{xxxiv}. The Institute for Alcohol Studies also concluded from Ministry of Justice data that tags reduced the likelihood of re-offending by 33% on average^{xxxv}. This has been supported by Police Scotland^{xxxvi} and Victim Support Scotland^{xxxvii}.

Given the success of alcohol monitoring tags, we would also look to establish a pilot for drug monitoring patches based on the same principles. This would see courts in designated areas order those whose crimes were driven by drugs to wear them.



Scrap the failed experiment of drug consumption rooms

The Thistle is a drug consumption room in the Calton area of Glasgow which allows addicts to legally take drugs under supervision from medical staff. It costs £2.3 million a year, will cost at least £6.9 million to run over its minimum three year lifetime^{xxxviii}, and so far has cost taxpayers £362 per drug injection^{xxxix}. However, it is not working and the cost to the taxpayer cannot be justified. In its first 10 months of operation, it did not refer a single user to rehab, less than 5 users to recovery hubs, only referred a tiny number of users to alcohol and drug recovery services - and of those it has referred, it cannot say whether any have taken up the offer.^{xl xli} Drug deaths increased across Scotland in the first six months of the year since it opened while there were more suspected drug deaths in Glasgow between January and September 2025 than in the same period in 2024 before the Thistle opened^{xlii xliii}. This is despite needle use by users at the Thistle tripling since it opened – at taxpayer expense^{xliv}.

The Scottish Conservatives were willing to give it a chance in the face of sky-high drug deaths but it is time to recognise that this is a failed experiment that has only brought misery to residents in Calton who are suffering from increased anti-social behaviour, drug dealing and discarded needles^{xlv}. One local resident said about the impact on them, “We have every sympathy for [the users], but we were told there would be fewer needles. There’s not. There are more and more needles going about. They said it wouldn’t attract drug users from other districts. It is”^{xlvi}. Glasgow City Council even had to shell out £5,000 to install needle bins nearby

following resident complaints about the impact the Thistle was having^{xlvii}. Meanwhile, those running the Thistle are so desperate for positive publicity that staff there have spent almost 100 hours just giving tours to members of the public and organisations to try and build up support for it^{xlviii}. To add insult to injury, Scottish Government health officials have disgracefully accused Calton residents of lying about the impact it has had on them^{xlix}.

The Scottish Conservatives would immediately close it down for the benefit of both its users and the people of Calton and prevent any more drug consumption rooms from being opened anywhere in Scotland, as is currently being considered in Edinburgh^l. This would save the taxpayer £6.9 million which we would instead invest in rehabilitation and recovery and treatment services, including increasing the number of residential rehabilitation beds to bring us in line with European levels.



Two strikes for drug possession

While the control of drugs is a reserved policy, we would lobby for a pilot of a groundbreaking new approach to drug possession known as a “two strikes” policy. Under this policy, where someone is caught with Class A or Class B drugs intended for personal use for the first time, we believe they should be offered the proportionate advice and treatment they need to get off drugs and beat or prevent any addiction. That is why our plans for increased investment in rehabilitation and treatment are so important.

However, if that same individual is then caught a second time with these drugs for personal use and has refused the offer of treatment, they should then face the full force of the law. Those possessing drugs they intend to sell should face strict consequences.

We would therefore lobby to introduce a pilot two strikes policy in a designated area to gather key data on the effectiveness of this approach. Those caught with drugs for the first time for personal use will benefit from support services such as rehabilitation and treatment, and if caught again after refusing treatment then they will face criminal consequences.



Conclusion

To tackle the scourge of drug and alcohol deaths we need bold, new action and that is what the Scottish Conservatives would deliver.

We would invest in rehabilitation, recovery and treatment services, repeal Minimum Unit Pricing and focus on improving alcohol addiction services, scrap the failed experiment of drug consumption rooms and redirect the millions saved into projects that work, and pilot a new approach to drugs policy.

A vote for the Scottish Conservatives in 2026 is a vote for the right to recovery.

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Endnotes

- i BBC News, 1 September 2025, [Scottish drug deaths fall but remain worst in Europe - BBC News](#)
- ii National Records of Scotland, 2 September 2025, [Drug-related deaths in Scotland, 2024 - National Records of Scotland \(NRS\)](#)
- iii The Herald, 14 April 2021, [Nicola Sturgeon: We took our eye off the ball on drug deaths | The Herald](#)
- iv National Records of Scotland, 23 September 2025, [Alcohol-specific deaths 2024 - National Records of Scotland \(NRS\)](#)
- v Scottish Government, 9 September 2025, [Suspected drug deaths in Scotland: April to June 2025 - Suspected drug deaths in Scotland: April to June 2025 - gov.scot](#)
- vi SNP, 13 July 2023, [A Caring & Compassionate Drugs Policy: Here's what decriminalisation would mean for Scotland — Scottish National Party](#)
- vii The Sunday Post, 5 October 2025, [We ask MSPs to put politics aside and back Right To Recovery Bill](#)
- viii Public Health Scotland, 18 February 2025, [Evaluation of the National Mission on Drug Deaths](#)
- ix Scottish Parliament, Accessed 16 October 2025, [Right to Addiction Recovery \(Scotland\) Bill | Scottish Parliament Website](#)
- x Faces and Voices of Recovery UK, 15 May 2024, [The Right to Recovery Bill: A Beacon of Hope for Comprehensive Addiction Treatment in Scotland | Favor](#)
- xi Scottish Parliament, 30 May 2022, [righttoaddictionrecoveryconsultationsummary-final.pdf](#)
- xii The Sunday Post, 5 October 2025, [We ask MSPs to put politics aside and back Right To Recovery Bill](#)
- xiii UK Department of Health and Social Care, 2 August 2021, [Review of drugs part two: prevention, treatment, and recovery - GOV.UK](#)
- xiv Scottish Parliament, Accessed 16 October 2025, [Right to Addiction Recovery \(Scotland\) Bill | Scottish Parliament Website](#)
- xv Scottish Government, 20 January 2021, [Drugs policy - update: statement by the First Minister - 20 January 2021 - gov.scot](#)
- xvi Scottish Government, 4 December 2020, [Residential Rehabilitation Working Group: drug and alcohol residential treatment services - recommendations - gov.scot](#)
- xvii Scottish Government, 30 November 2021, [Expanding access to Residential Rehabilitation in Scotland - gov.scot](#)
- xviii Scottish Government, 2 December 2025, [Findings - Residential rehabilitation bed capacity in Scotland, October 2025 - gov.scot](#)
- xix Daily Mail, 20 October 2024, [Revealed, £20million bill for methadone on Scotland's cash-strapped NHS | Daily Mail Online](#)
- xx National Records of Scotland, 2 September 2025, [Drug-related deaths in Scotland, 2024 - National Records of Scotland \(NRS\)](#)
- xxi BBC News, 25 March 2015, [Methadone programme 'is a black hole', says drug misuse expert - BBC News](#)
- xxii BBC News, 25 March 2015, [Methadone programme 'is a black hole', says drug misuse expert - BBC News](#)
- xxiii BBC News, 25 March 2015, [Methadone programme 'is a black hole', says drug misuse expert - BBC News](#)
- xxiv NHS Greater Glasgow and Clyde FOI, 23 October 2025, available upon request
- xxv Scottish Government, 8 July 2024, [Scottish Drugs Forum in receipt of funding: FOI release - gov.scot](#)
- xxvi Scottish Drugs Forum, 15 May 2025, [SDF CEO Gives Evidence on Right to Addiction Recovery Bill - Scottish Drugs Forum](#)
- xxvii Phoenix Futures, Accessed 4 February 2026, [Rae House | Phoenix Futures](#)
- xxviii National Records of Scotland, 23 September 2025, [link](#)
- xxix The Sun, 22 December 2024, [Scots are getting less booze for their buck as we compare prices with English Christmas party revellers](#)
- xxx Daily Mail, 23 September 2025, [Scots could see 'automatic' hike in booze every year to tackle alcohol-related deaths | Daily Mail Online](#)
- xxxi Office for National Statistics, 22 October 2025,



[Consumer price inflation, UK - Office for National Statistics](#)

- xxxii UK Legislation, 2019, [link](#)
- xxxiii UK Government, 19 November 2022, [link](#)
- xxxiv UK Government, 4 April 2022, [link](#)
- xxxv Institute of Alcohol Studies, 21 January 2025, [link](#)
- xxxvi The Herald, 18 February 2014, [link](#)
- xxxvii Victim Support Scotland, 2017, [link](#)
- xxxviii Glasgow City Council, 13 January 2025, [Glasgow opens UK's first safer drug consumption facility - Glasgow City Council](#)
- xxxix The Sun, 11 October 2025, [Scots taxpayers 'pay £362' EVERY TIME an addict shoots up in controversial drug fix room](#)
- xl The Sun, 2 October 2025, [No addicts referred to rehab from the UK's first legalised 'fix room'](#)
- xli NHS Greater Glasgow and Clyde FOI, 10 December 2025, available upon request)
- xlii Scottish Government, 9 September 2025, [Suspected drug deaths in Scotland: April to June 2025 - Suspected drug deaths in Scotland: April to June 2025 - gov.scot](#)
- xliii Scottish Government, 16 December 2025, [link](#)
- xliv NHS Greater Glasgow and Clyde FOI, 2 February 2026, available upon request
- xlvi STV News, 6 June 2025, [Needle bins installed near Glasgow drug consumption room after 'dumping ground' concerns | STV News](#)
- xlvi Glasgow Times, 1 May 2025, [Glasgow residents say consumption room has led to 'influx of crime' | Glasgow Times](#)
- xlvi NHS Greater Glasgow and Clyde FOI, 1 August 2025, available upon request
- xlvi NHS Greater Glasgow and Clyde FOI, 2 October 2025, available upon request
- xlix Scottish Government FOI, 13 October 2025, available upon request
- I BBC News, 27 August 2025, [Drug consumption room plan for Edinburgh's Old Town - BBC News](#)

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